

Newton County Health Department, Georgia

Community Health Assessment, 2013



About the Newton County Health Department

The Newton County Health Department continuously monitors the health status of the community to identify health problems, educate the public on ways to reduce health risks, and promote better health through individual contact and media interactions.

We regularly participate in and mobilize community groups to develop policies and action plans to improve the health of the people in the community. The health department enforces laws, regulations, and ordinances that protect health and ensure safety. Working together to provide these vitally important, essential public health services, we can improve the quality of life for everyone in the community and state.

Our Mission

To protect and improve the health of our community by monitoring and preventing disease; promoting health and well being; and preparing for disasters.

Our Vision

A healthy, protected, and prepared community.

Our Values

Availability: We will be available to our clients through emergency preparedness services, disease and outbreak investigations, expanded hours and readily available services.

Affability: We will work to ensure our clients have a good experience at our clinics. We will treat clients, co-workers, partners and others in our community with respect. We will value our employees.

Ability: We will work toward a high level of competency in all areas of service.

Accountability: We will be good stewards of the funds and materials we receive.

Adaptability: We will always look forward to meet the current and future needs of our community.

Purpose of This Report

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

-World Health Organization (WHO)¹

This report describes a community health assessment (CHA) for Newton County, Georgia. By examining the county's health status, it will help our community focus our efforts on the most important health needs of county residents. This community-wide health assessment is intended to help shape coordinated community plans to improve health.

This report focuses not just on disease indicators like death rates and case counts, but also on the many factors that influence health, which include income, housing, education, and transportation. This focus is consistent with the WHO definition of health—stated above—and reflects the diversity of community efforts currently ongoing and needed in Newton County to improve health.

This report is thus complementary to the 2013 Community Health Needs Assessment report issued by Newton Medical Center² and was done in collaboration with the Newton County Community Partnership (Newton Partnership).³

¹ World Health Organization <http://www.who.int/about/definition/en/print.html>

² Newton Medical Center Community Health Needs Assessment
<http://www.newtonmedical.com/pdf/Newton%20Final%20Report2013.pdf>

³ Newton County Community Partnership <http://www.newtonpartnership-gafcp.org/>

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How the Assessment was Conducted

Newton County Medical Center, the Newton Partnership, and the Health Department gathered community input regarding health issues in the county through a series of community meetings.⁴ These meetings included a diverse group of participants, including representatives of mental health, law enforcement, senior advocates, concerned citizens, and elected representatives. Three priority issues were identified through these meetings and are summarized in the following section. This report relied upon the findings of these meetings, which are summarized in the medical center's CHNA.⁵

To supplement community information in the assessment, data from the U.S. Census Bureau⁶ were included on county demographics, income and poverty, and transportation. Illness and death statistics (morbidity and mortality) and other demographic information were obtained from the Georgia Department of Public Health's Online Analytical Statistical Information System (OASIS).⁷ OASIS dashboards allow for comparison of Newton County morbidity and mortality rates with statewide rates. Other data came from the County Health Rankings.⁸ When possible, available data for Newton County were compared against Healthy People 2020 goals established by the U.S. Department of Health and Human Services.⁹

To better understand Newton County's determinants of health, including economics, transportation, land use, recreation, and water resources, documents from other county agencies were reviewed and referenced. In particular, the Newton County 2006-2036 Comprehensive Plan (released 2006),¹⁰ the Newton County Community Agenda (released 2008),¹¹ and the Newton 2050 Plan¹² (ongoing) provided key information.

Newton County Focus Group Meetings and Health Priorities

There were three focus group meetings

- Community Meeting #1: November 7, 2012 at 10:30 am
- Community Meeting #2: November 8, 2012 at 3:30 pm

⁴ Newton Partnership—Making a Plan for Health <http://www.newtonpartnership-gafcp.org/planning-for-a-healthier-community/>

⁵ Newton Medical Center Community Health Needs Assessment <http://www.newtonmedical.com/pdf/Newton%20Final%20Report2013.pdf>

⁶ U.S. Census Bureau, American FactFinder <http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml###>

⁷ Online Analytical Statistical Information System <http://oasis.state.ga.us/oasis/>

⁸ County Health Rankings <http://www.countyhealthrankings.org/>

⁹ Healthy People 2020 <http://www.healthypeople.gov/2020/default.aspx>

¹⁰ Newton County 2006-2028 Comprehensive Plan: Community Assessment <http://www.dca.state.ga.us/development/PlanningQualityGrowth/programs/documents/NewtonCo.CAss.pdf>

¹¹ Newton County Community Agenda <http://www.dca.state.ga.us/development/PlanningQualityGrowth/programs/documents/NewtonCo.CAg.pdf>

¹² Newton 2050 Plan <http://www.centernewton.org/plan/the-2050-plan/>

- Community Meeting #3: November 9, 2012 at 8:00 am

The following issues were identified as “priority” needs by the community participants. The findings are listed in the order of priority as determined by the focus groups.¹³

Nine Priority Needs

1. Access to care—Providers and Prevention

- a. There is a need for free or low cost care for those in poverty, the uninsured, or the underinsured
- b. There is a need for a centralized resource directory to assist community residents in identifying the appropriate resources to meet their needs
- c. There is a shortage of providers/specialists in the community
 - i. Lack of mental health providers
 - ii. Lack of geriatric health providers
 - iii. Lack of rheumatology and cardiology providers
 - iv. Lack of mammography services
 - v. Lack of primary care providers
- d. There is a need for education and awareness on the prevention of diseases and the appropriate time and place to seek care for certain health conditions.
 - i. Oral health
 - ii. Health behaviors and habits
 - iii. Over-utilization of the ER

2. Obesity and Diabetes

- a. There is a need for education and awareness on the causes of obesity and diabetes
 - i. Education needs to exist in locations where people are—easily accessible
 - ii. There is lack of parenting education as it relates to proper diet and activity levels
 - iii. There is a lack of education and intervention for young people
 - iv. There is a lack of physical activity in schools
 - v. There is a lack of a wellness culture
- b. There are limited places for physical activity that are safe and cost-effective
 - i. There is a lack of after-school activities and facilities for young people
 - ii. The environment is not conducive to staying active—lack of sidewalks

3. Mental Health

- a. There is a shortage of mental health providers and rehabilitation facilities in the community

¹³ Newton Medical Center Community Health Needs Assessment
<http://www.newtonmedical.com/pdf/Newton%20Final%20Report2013.pdf>

- i. Lack of crisis facilities
 - ii. Lack of pediatric facilities
 - iii. Lack of housing facilities
 - iv. Lack of geriatric services
 - v. Lack of family support services
- b. There is a lack of affordable mental health services for uninsured or underinsured
- c. There is a need for education and awareness on mental health issues across the lifespan

4. Senior Health

- a. There is a need for education and awareness on Senior health issues
- b. There is a shortage of free and affordable providers for Seniors
 - i. Lack of specialists
- c. There is a lack of family support services like day care, etc.
- d. There is a need for transportation for Seniors

5. Access to Care—Transportation

- a. Transportation to providers is an issue for all population groups, especially the young, poor, and Senior residents

6. Respiratory

- a. There is a need for outreach education and community awareness regarding respiratory diseases.
- b. There is a need for more smoke-free establishments

7. Cancer

- a. There is a need for education and awareness regarding cancer treatment and prevention
 - i. Proper diet and exercise
- b. There is a need for more availability of mammograms to the underserved
- c. There is a shortage of providers and specialists for cancer treatments

8. Adolescent Lifestyle—Including Alcohol, Tobacco, and Drugs

- a. There is a need for early and accurate education to teens concerning sex education and contraceptive use
 - i. STD prevention
 - ii. Pregnancy prevention
- b. There is a need for education, awareness and prevention surrounding alcohol abuse as it relates to drinking and driving.
- c. There is a lack of after-school activities for teens and adolescents

9. Heart Disease and Stroke

- a. There is a need for community outreach and awareness in regarding prevention, screening, and nutrition

Quick Stats about Newton County and the Health Priorities

- The county's **population increased** dramatically through the 1990s and 2000s, but the rate of increased **slowed markedly** after 2008; the proportion of residents **65 years and older is growing**
- The county **diversified** substantially between 2000 and 2010; the non-Hispanic White population declined from 74% to 52%
- About **one in five children** live in **poverty**
- **Two-thirds** of students are **eligible for free and reduced-price** school meals
- **The county ranks 33rd** in overall health among Georgia's 159 counties
- Nearly **one in five** Newton County residents **lacked health insurance** in 2012, including 41% of adults 18-24 years
- There were about **3,000 residents per primary care physician**, which was nearly double the statewide ratio of 1,600:1
- There were about **6,400 residents per dentist**, which was nearly three times the statewide ratio of 2,250:1; Newton County has been designated a **health provider shortage area** for dentists
- There were about **33,000 residents per mental health care provider**, which was nearly **ten times higher** than the statewide ratio of about 3,500:1
- Nearly **one in three** Newton County adults are **obese**, and **one in eight** low-income preschool **children** are obese
- **One in four** Newton county residents gets **no leisure-time physical activity**
- The number of Newton County residents with **diabetes increased by 68%** between 2004 and 2010
- The age-adjusted **death rate to suicide** in Newton County was higher than the statewide rate
- The county has **no transit system**
- **Two-thirds** of renters and **two in five** home mortgage holders are considered "**cost burdened**" when it comes to housing
- **One in four** residents has low access to a **grocery store**
- **More than one in five** residents smoke **tobacco**, including **one in eleven pregnant women**
- Cancer caused more than one in five deaths; the **overall cancer death rate** and death rates (age-adjusted) for the **four most common cancers** (breast, colorectal, lung, and prostate) were **higher than Georgia rates**
- The **teen pregnancy rate has declined substantially** in the past decade and is now below the Healthy People 2020 goal, but the teen pregnancy rate for Hispanic girls is **more than double** the rates for both White and Black girls
- The rate of **Chlamydia** cases has **more than doubled** in the past decade

Priority areas are addressed throughout this report.

Background: The National Health Context

When assessing a community’s health, it is important to keep in mind which illnesses and conditions cause the most disability and early death. This burden of disability and early death is commonly measured with an indicator called disability-adjusted life years, or DALYs. DALYs measure both the years lost to early death and those worsened due to disease and disability. Although this measure is not available specifically for Newton County, recent estimates for the United States serve as a useful benchmark. Figure 1, which uses 2010 data from the Institute for Health Metrics and Evaluation,¹⁴ clearly shows that non-communicable diseases cause the vast majority (85%) of DALYs in the United States. These non-communicable diseases include heart and circulatory diseases (17% of DALYs), cancer (15%), mental health disorders (14%), musculoskeletal disorders (12%), and a range of other health problems like dementia, emphysema, and diabetes.

Injuries, shown in green, are the second largest category causing DALYs, representing 10% of total DALYs. This category includes transport injuries (including motor vehicle collisions; 3% of DALYs), self-harm and interpersonal violence (3%), and unintentional injuries (4%). The final category causing DALYs included communicable diseases (3%), diseases of the newborn (2%), maternal conditions (<1%), and nutritional deficiencies (<1%).

Figure 1. Distribution of Disability-Adjusted Life Years (DALYs) by Type of Condition or Illness, United States, 2010



Source: Institute for Health Metrics and Evaluation (<http://viz.healthmetricsandevaluation.org/gbd-compare/>)

¹⁴ Institute for Health Metrics and Evaluation (IMHE): Global Burden of Disease <http://viz.healthmetricsandevaluation.org/gbd-compare/>

Clearly, to make the biggest impact on health, we must reduce the burden of non-communicable diseases like heart disease, cancer, and diabetes. However, the causes of these diseases are complex and long-term, are strongly influenced by the environment and community, and are tied to human behavior. They must be addressed from their very beginnings through environmental design, prevention efforts, community interventions, primary care, and at later stages through hospital care. Because of this complexity and the range of influences, we must work across a variety of disciplines and specialty areas to make the biggest impact on health. Areas that the public might consider unrelated to health, including income, housing, education, and transportation, must be part of the discussion.

The importance of non-communicable diseases is further evident in the top ten health risk factors for early death and disability in the United States in 2010:¹⁵

- Poor diet (dietary risks)
- Smoking
- Overweight and obesity
- High blood pressure
- Diabetes and pre-diabetes
- Physical inactivity
- Alcohol use
- High cholesterol
- Drug use
- Air pollution (specifically particulate matter)

Infectious diseases, injuries, and maternal and newborn health remain critical to the overall health of the population. These areas need continuous focus to prevent outbreaks, disease, and tragic outcomes.

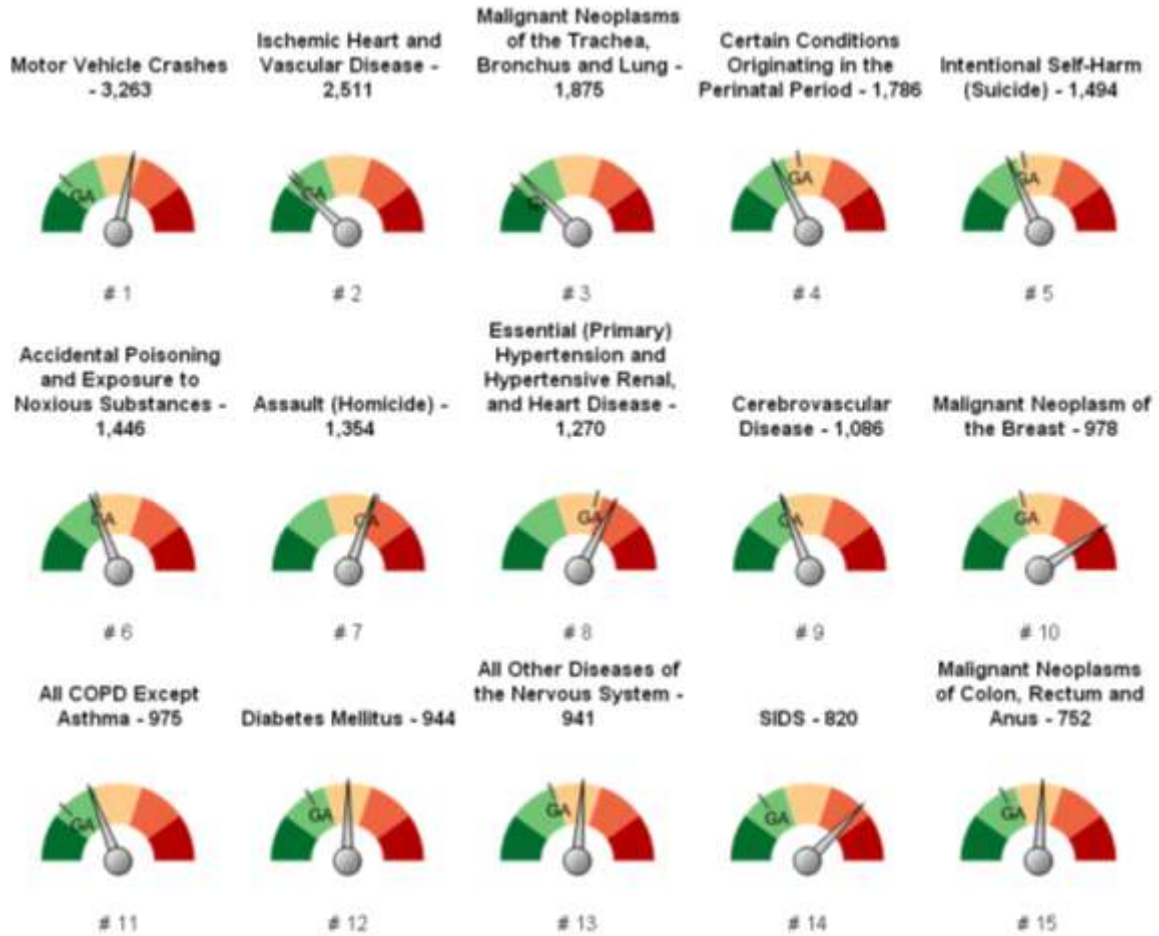
Background: Premature Death in Newton County

A combined measure of death *and* disability (like the DALY) in Newton County is not available, but data are available on leading causes of premature death in Newton County (Figure 2).¹⁶

Figure 2. Top 15 Leading Causes of Premature Death in Newton County, Georgia, 2007-2011

¹⁵ IMHE <http://www.healthmetricsandevaluation.org/gbd/visualizations/gbd-arrow-diagram>

¹⁶ Source: Georgia Online Analytical Statistical Information System (<http://oasis.state.ga.us/oasis/>)

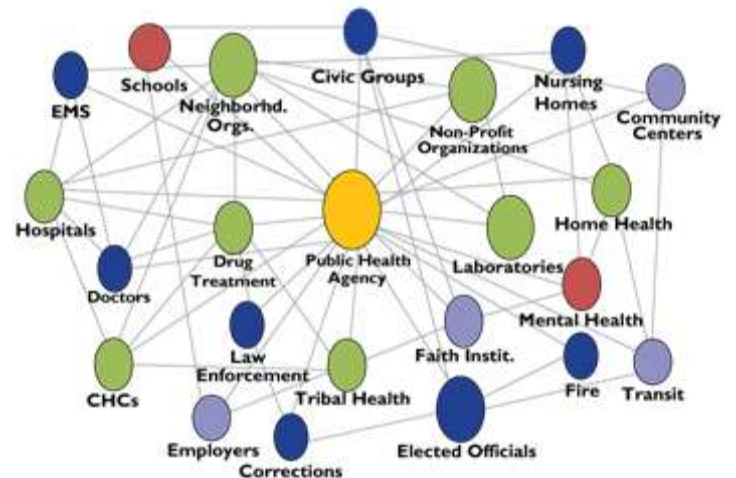


Number indicates years of potential life lost due to death before the age of 75 per 100,000 population less than 75 years of age. The “GA” marker indicates the Georgia rate.

Source: Georgia Online Analytical Statistical Information System (<http://oasis.state.ga.us/oasis/>)

Background: The “Public Health System:” Far Beyond the Health Department

All communities have a public health system to prevent and treat illness, disability, and death. A public health system is composed not just of government agencies, but includes many other organizations and people.



According to the CDC’s National Public Health Performance Standards, public health systems are “all public, private, and voluntary entities that contribute to the delivery of essential public health services within a jurisdiction.”¹⁷

A community’s public health system includes:

- Public health agencies at state and local levels
- Healthcare providers
- Public safety agencies
- Human service and charity organizations
- Education and youth development organizations
- Recreation and arts-related organizations
- Economic and philanthropic organizations
- Environmental agencies and organizations

Organization of This Report

We know that much of what influences our health happens outside of the doctor’s office—in our schools, workplaces and neighborhoods.

-County Health Rankings & Roadmaps¹⁸

When we think about health, we often think first about medical care. As noted in the quote above, however, medical care is only part of the health picture. Section 1 describes many of the factors that strongly influence health.

Section 1: Factors that Influence Health

- (1) Demographics and Diversity
- (2) Economy and Basic Needs
- (3) Housing
- (4) Education and Child Activities
- (5) Transportation and Land Use
- (6) Community Engagement
- (7) Safety
- (8) Environment

The second section of this report focuses on the health indicators of Newton County residents and examines the critical role of the health care sector.

Section 2: Health Status

- (1) Overall Health Status
- (2) Access to Health Services

¹⁷ Essential Public Health Services <http://www.cdc.gov/nphpsp/essentialservices.html>)

¹⁸ County Health Rankings & Roadmaps <http://www.countyhealthrankings.org/about-project>

- (3) Health Behaviors
- (4) Chronic Diseases
- (5) Cancer
- (6) Injuries
- (7) Teen Pregnancy
- (8) Maternal and Infant Health
- (9) Infectious Diseases
- (10) Mental Health and Social Support
- (11) Emergency Preparedness

Section One: Determinants of Health

The social determinants of health are the circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics.

- World Health Organization¹⁹

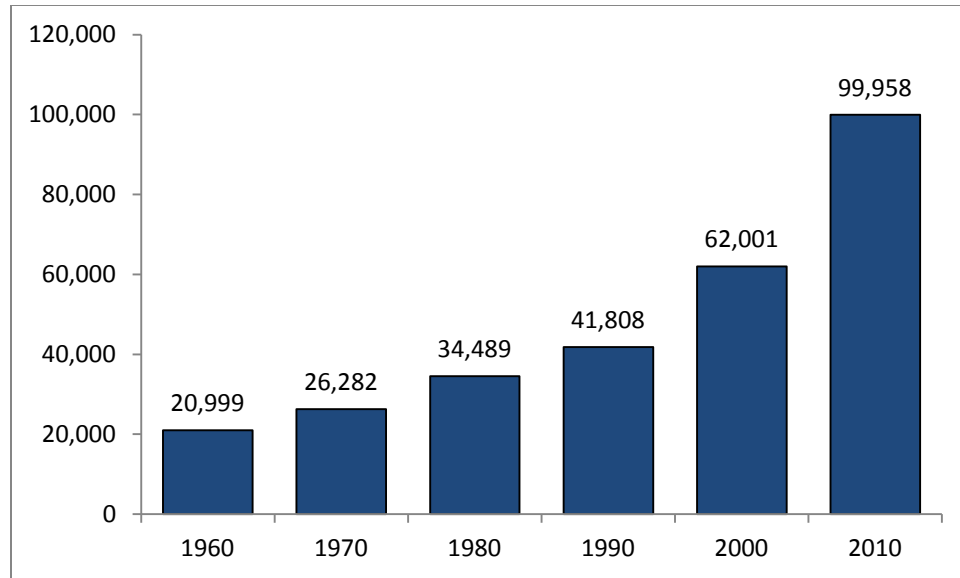
Demographics and Diversity

To understand and improve health—and health determinants—in Newton County, we must first consider the county and its residents.

Newton County is located about 36 miles east of Atlanta at the edge of the metropolitan area’s eastern suburbs. In recent decades, the county has grown dramatically with the population more than doubling from 1990 to 2010 (Figure 3) following decades of slower growth. According to the U.S. Census Bureau, the county’s land area is 25% urban and 75% rural, although more than two-thirds (69%) of the population lives in the urban areas. Newton County includes the cities of Covington (13,226 residents), Oxford (2,134 residents), Porterdale (1,429 residents), Newborn (696 residents), and Mansfield (410 residents).

Figure 3. Population of Newton County, Georgia, 1960-2010

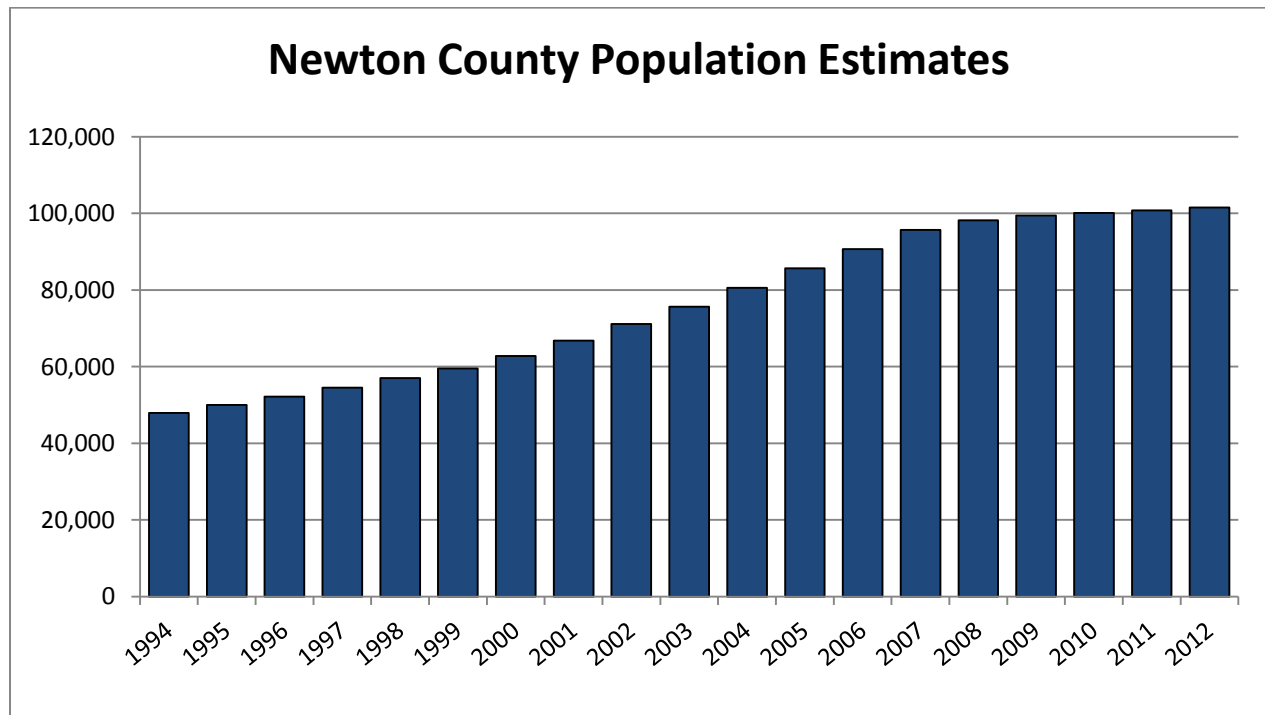
¹⁹ WHO: Social Determinants of Health
http://www.who.int/social_determinants/thecommission/finalreport/key_concepts/en/index.html



Source: U.S. Census Bureau, 2010

It is important to note that annual population estimates suggest that the rapid population growth apparent in Figure 3 and projected onward in the Newton County Community Agenda had slowed at about the time the report was released in 2008, likely due to the economic recession. From 2008 to 2012, the population grew from an estimated 98,240 to 101,505 (Figure 4), or less than 1% (< 1,000 people) per year. By comparison, rates of population growth from 2000 to 2007 were over 5% per year.

Figure 4. Annual Population Estimates, Newton County, Georgia, 1994-2012

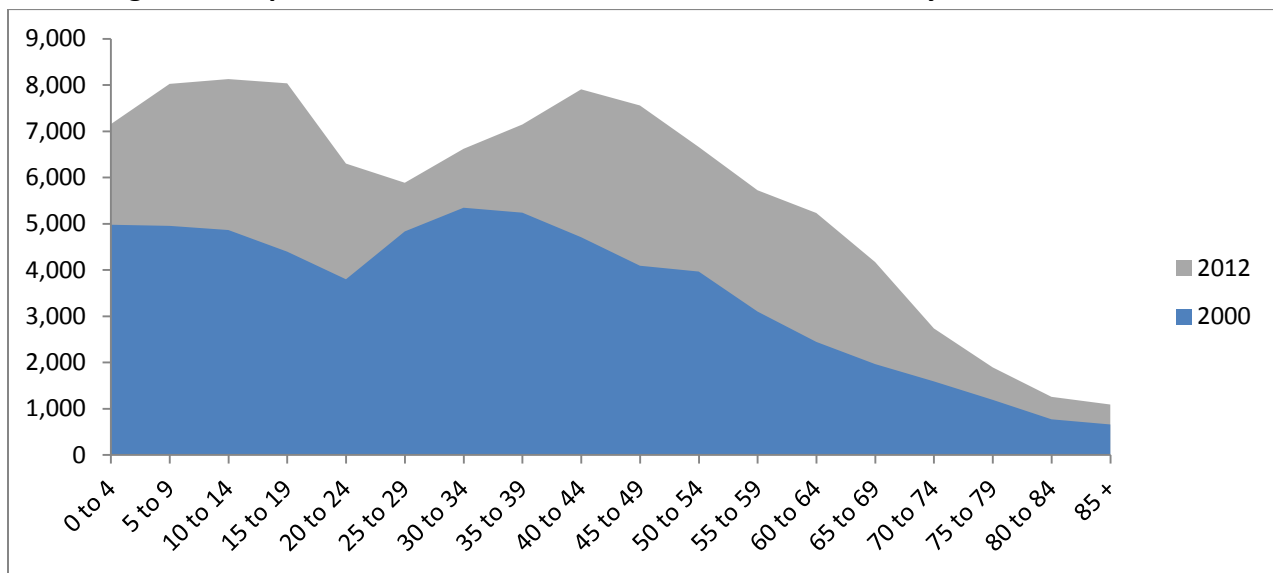


Source: U.S. Census Bureau, 2012

Age Distribution

Newton County’s population is relatively young (Figure 5); however, its senior population is projected to grow rapidly in the coming years.²⁰ People in their sixties were the fastest growing population group from 2000 to 2012 (Figure 6), suggesting that the senior population is growing and will continue to grow. In 2012, nearly one-third (30%) of the population was younger than 20 years and about one in 9 residents (11%) were 65 years or older. Newton’s 2012 population distribution (Figure 5) and the percentage change from 2000-2012 (Figure 6) further suggest that the county has an increasing number of “Baby Boomers,” those born between 1946 and 1964, who will reach their 65th birthday in the coming years.

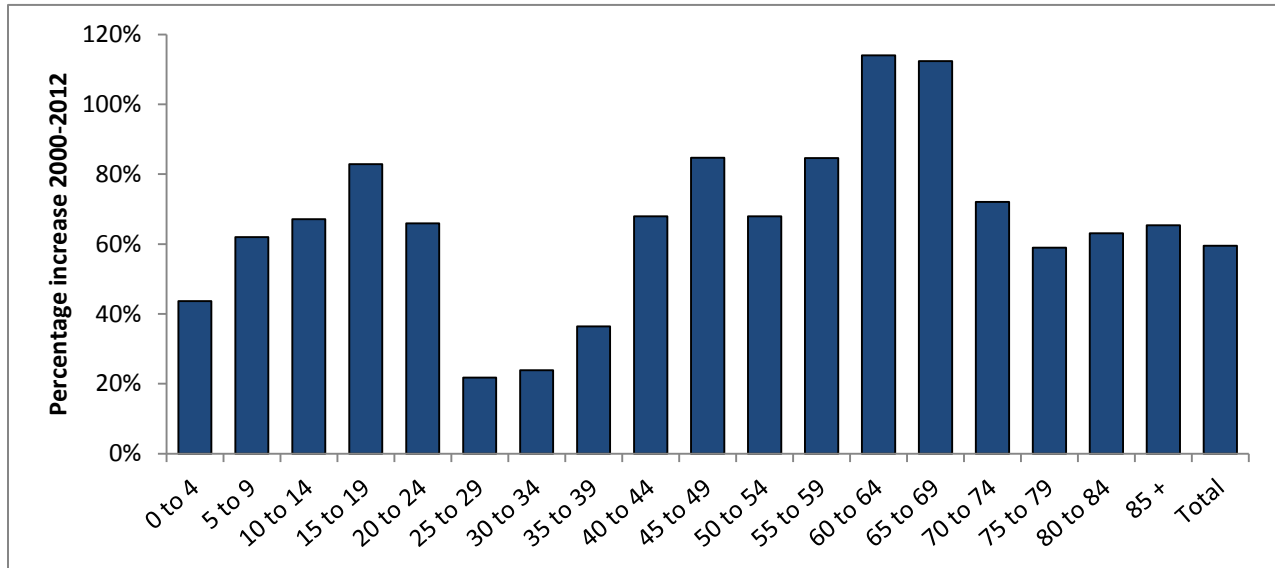
Figure 5. Population Distribution of Residents, Newton County, 2000 and 2012



Source: U.S. Census Bureau

²⁰ Newton County 2006-2028 Comprehensive Plan: Community Assessment
<http://www.dca.state.ga.us/development/PlanningQualityGrowth/programs/documents/NewtonCo.CAss.pdf>

Figure 6. Percentage Change in Population by Age Group, Newton County, 2000–2012



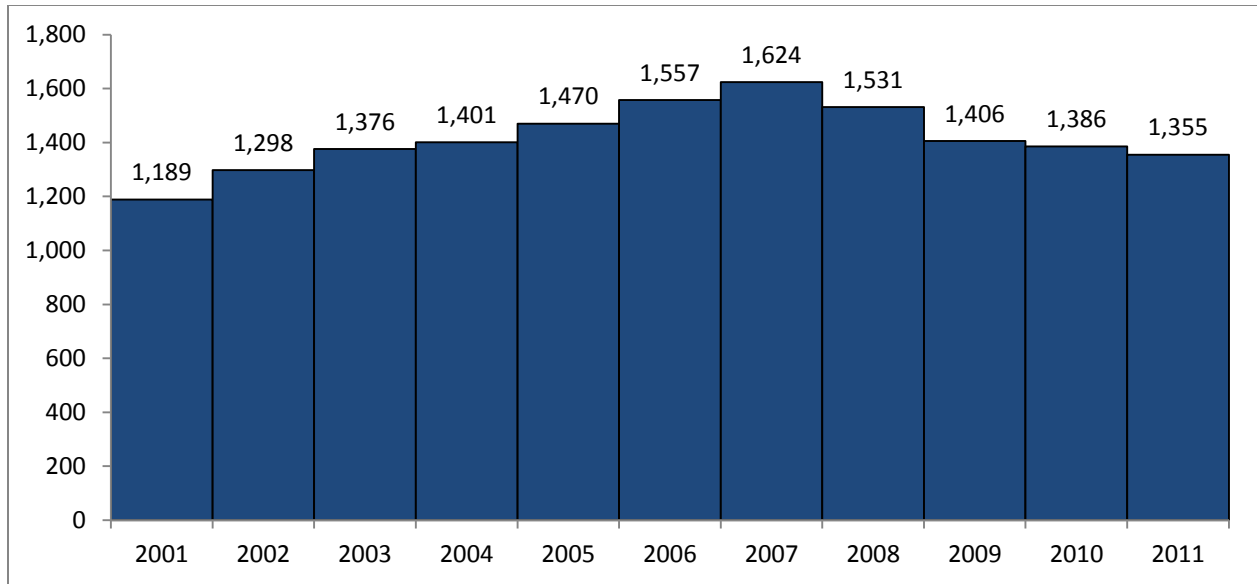
Source: U.S. Census Bureau

Although the population is young, the number and rate of births in the county have declined since 2007 (Figure 7).²¹ The number of births to Newton County mothers in 2011 (the most recent year with available data) was at its lowest point since 2002 despite many more reproductive-age women in the county. The number of births peaked in 2007 at 1,624 and declined to 1,355 in 2011, representing a 17% decline over these five years. The birth rate (or number of births per 1,000 women age 10–55 years) declined by 20% over this same period.²²

Figure 7. Number of Births to Newton County Mothers, 2001-2011

²¹ Georgia Online Analytical Statistical Information System

²² Georgia Online Analytical Statistical Information System



Source: OASIS (<http://oasis.state.ga.us/oasis/>)

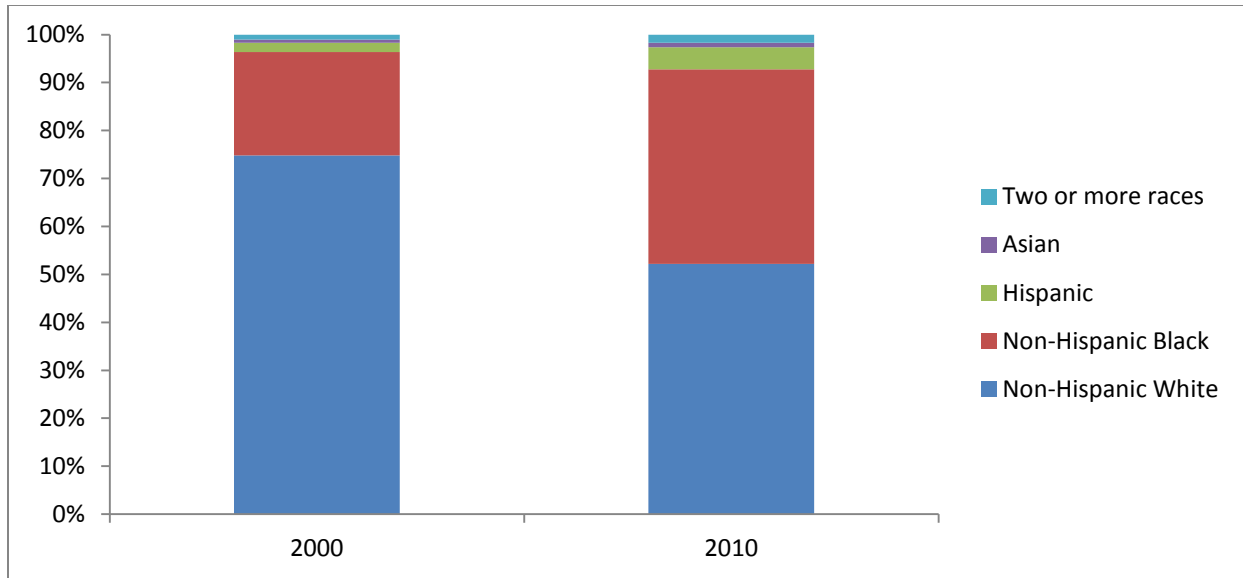
Diversity

Newton County has grown more diverse since 2000. According to the 2010 U.S. Census, about half (52%) of the population was non-Hispanic White, 40.4% was non-Hispanic Black, 4.6% was Hispanic (of any race), 0.9% was Asian, and 1.7% was multiracial (Figure 8). By comparison, the county’s population in 2000 was about three-quarters (74.2%) non-Hispanic White, 22.2% Black, 1.9% Hispanic, 0.7% Asian, and 1.0% multiracial. Similar to the 2000 distribution, Census data show that the population in both 1980 and 1990 was about three-quarters White and one-quarter Black.

In the most recent census, the Hispanic population of Newton County (4.6%) was majority Mexican (2.7% of the total population) and the remaining Hispanic population identified as Puerto Rican (0.7%), Cuban (0.3%), or other Hispanic or Latino (1.0%). Among the 0.9% of the population that reported being Asian, 0.2% were Asian Indian, 0.1% were Chinese, 0.1% were Filipino, 0.1% were Korean, 0.1% were Vietnamese, and 0.2% were other Asian.

According to the U.S. Census Bureau’s five-year estimates for 2007-2011, about one in fifteen (6.5%) Newton County residents were foreign born. Among these estimated 6,379 foreign born residents, most (72%) were from Latin America, 10% were from Europe, 9% were from Asia, 8% were from Africa, 1% were from elsewhere in North America, and <1% were from the Oceania region. More than three-quarters (76.3%) of the foreign-born population during this period had entered the United States before 2000. Sixty-one percent of Newton County residents were born in Georgia and 31% were born in another state.

Figure 8. Race/Ethnicity Distribution of Newton County Residents, 2000 and 2010



Source: U.S. Census Bureau

Linguistic Isolation

People who do not speak English in Newton County may have difficulty accessing services that are available to fluent English speakers. In Newton from 2007-2011, an estimated 6.4% of people age 5 years or older spoke a language other than English at home, and 2.3% spoke English less than “very well” (over three-quarters of whom spoke Spanish at home).

Families and Households

In 2010, there were an estimated 34,390 households in Newton County, with an average of 2.9 people per household.²³ Families—defined as a householder with at least one related person—made up about three-quarters (76%) of households; just over half (52%) of all households were married-couple families and 25% were families without a married couple. Twenty percent of households were composed of people living alone (over a quarter of whom were age 65 years or older) and 4% were households in which no one was related to the householder. Less than half of households (43%) included children younger than 18 years old.

Newton County’s population has been quite mobile. According to 2007-2011 estimates, one in five residents (18%) moved or changed residence in the previous year. One in ten residents (10%) had moved to Newton from outside the county in the previous year, including one in forty (2.5%) who moved from another state.

²³ U.S. Census Bureau



Source: Newton County Community Partnership <http://newton.gafcp.org/>

Economy and Basic Needs

*Few people would deny that there are many advantages of having more income or wealth. Nevertheless, apart from the well-known link between economic resources and being able to afford health insurance and medical care, their influence on **health** has received relatively little attention from the general public or policy-makers, despite a large body of evidence from studies documenting strong and pervasive relationships between income, wealth and health*

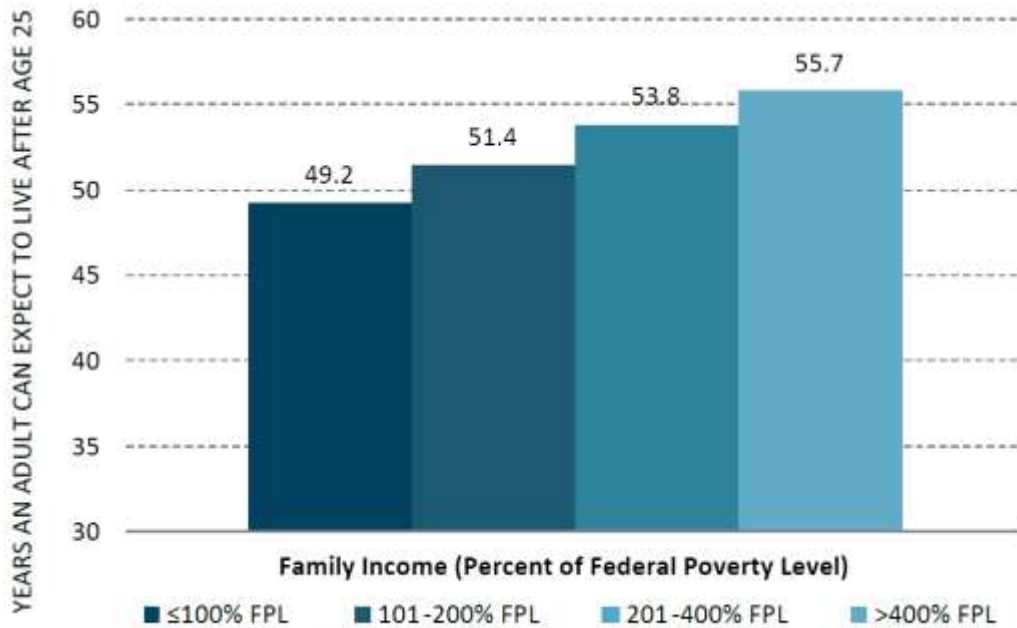
-Robert Wood Johnson Foundation (RWJF), Report on Income, Wealth, and Health²⁴

As described by the RWJF above, there are strong links between income, wealth, and health, which is why any health assessment must include an examination of these factors. To give just one example of the connection between income and health, life expectancy at age 25 is closely correlated with income as a percentage of the federal poverty level (FPL) (Figure 8). Life expectancy at age 25 was more than six years longer for people earning more than four times the FPL compared with those earning less than or equal to the FPL.²⁵

Figure 8. Number of Years an Adult Can Expect to Live After Age 25 by Family Income, United States

²⁴ Robert Wood Johnson Foundation
http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2011/rwjf70448

²⁵ Robert Wood Johnson Foundation
http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2011/rwjf70448



Source: RWJF (http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2011/rwjf70448)

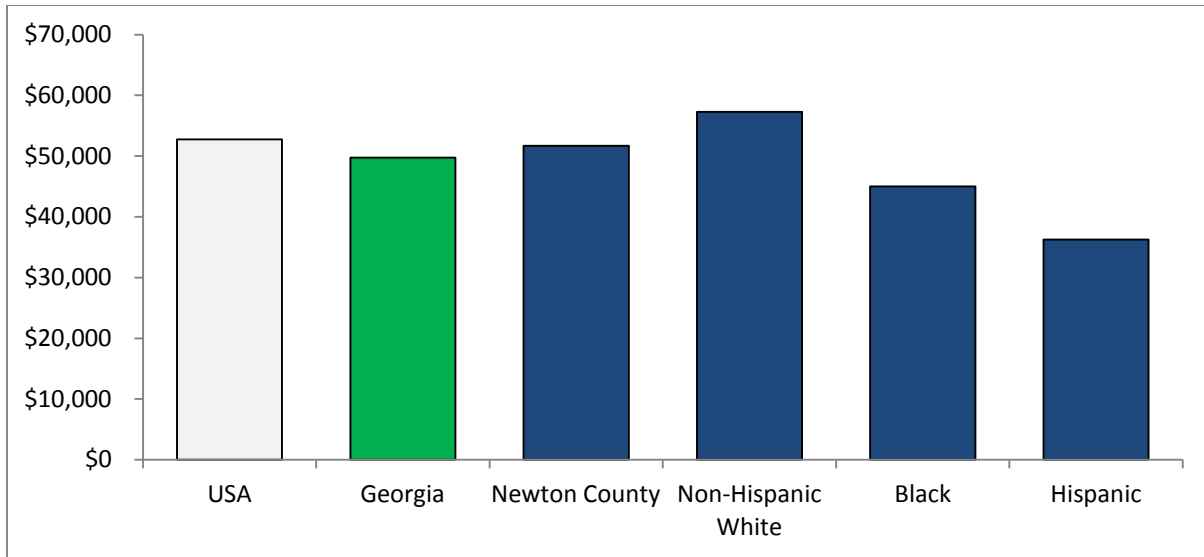
We will examine income indicators for Newton County first and then markers of poverty within the county.

Household Income

Newton County’s median household income is above the state median but below the national figure. From 2007-2011, the median household income in Newton County was estimated to be \$51,691. By comparison, the Georgia median was \$49,736 and the national median was \$52,762.²⁶ Non-Hispanic Whites had the highest median income in Newton County, estimated to be \$57,271. Among other race/ethnic groups, the estimates of median household income were \$45,023 for Black residents and \$36,241 for Hispanic residents. Married couples had an estimated median income of \$68,859, which exceeded the estimated median incomes for male householders without a wife present (\$41,040) and female householders without a husband present (\$30,724). People 65 years and older had an estimated median income of \$38,025.

Figure 9. Median Household Income in Newton County by Race/Ethnicity, 2007-2011

²⁶ U.S. Census Bureau



Source: U.S. Census Bureau, American Community Survey

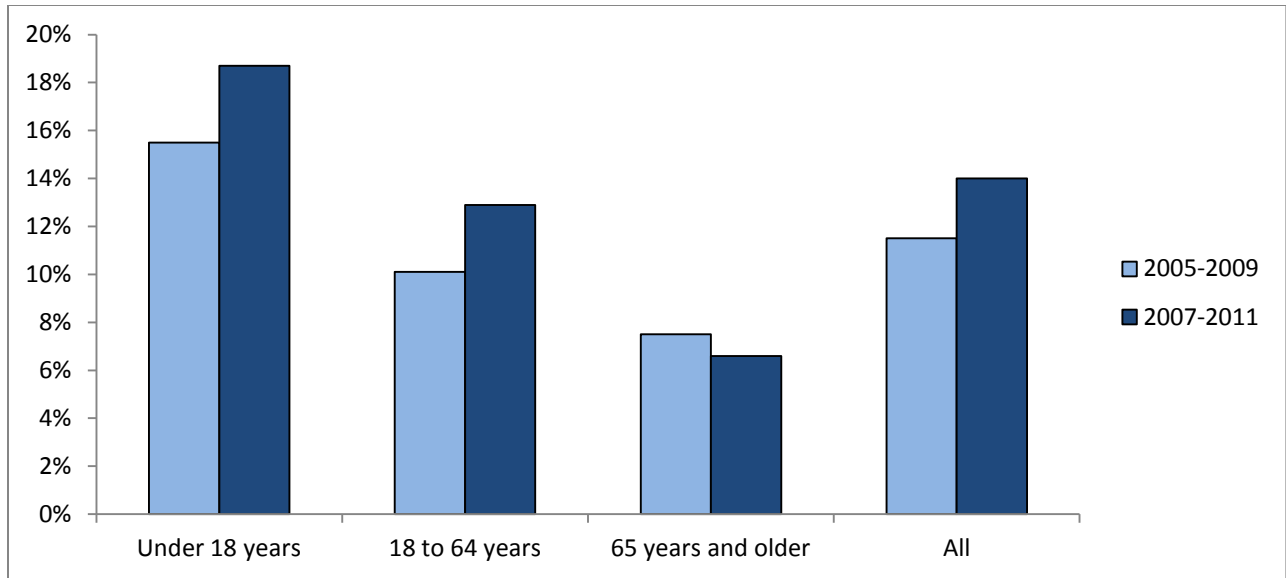
Poverty

Although the county’s median income is higher than the state’s, large numbers of residents live in poverty. From 2007-2011, about one in seven (14%) of Newton County residents had household incomes below the federal poverty level. About one in five (19%) children lived in poverty, as did 13% of residents 18-64 years and one in fourteen (7%) residents age 65 years or older (Figure 10). Compared with the estimates 2 years earlier, poverty rates increased in all age groups except among those age 65 years and older (Figure 10). About one in eleven (9%) non-Hispanic Whites lived in poverty compared with about one in five (19%) Black residents, and nearly one in four (24%) Hispanic residents (Figure 11). Two-thirds (67%) of students in 2013 were eligible to receive free or reduced price school meals, which was higher than the statewide percentage of 60%.²⁷ In some schools, over 70% of children are eligible for free school lunch (not including those eligible for reduced-price lunch).²⁸ From 1995-2013, the percentage of students eligible for free or reduced price meals in Newton County grew by over 50% (Figure 12).

Figure 10. Percent of People Living in Poverty by Age Group, Newton County, 2005-2009 and 2007-2011

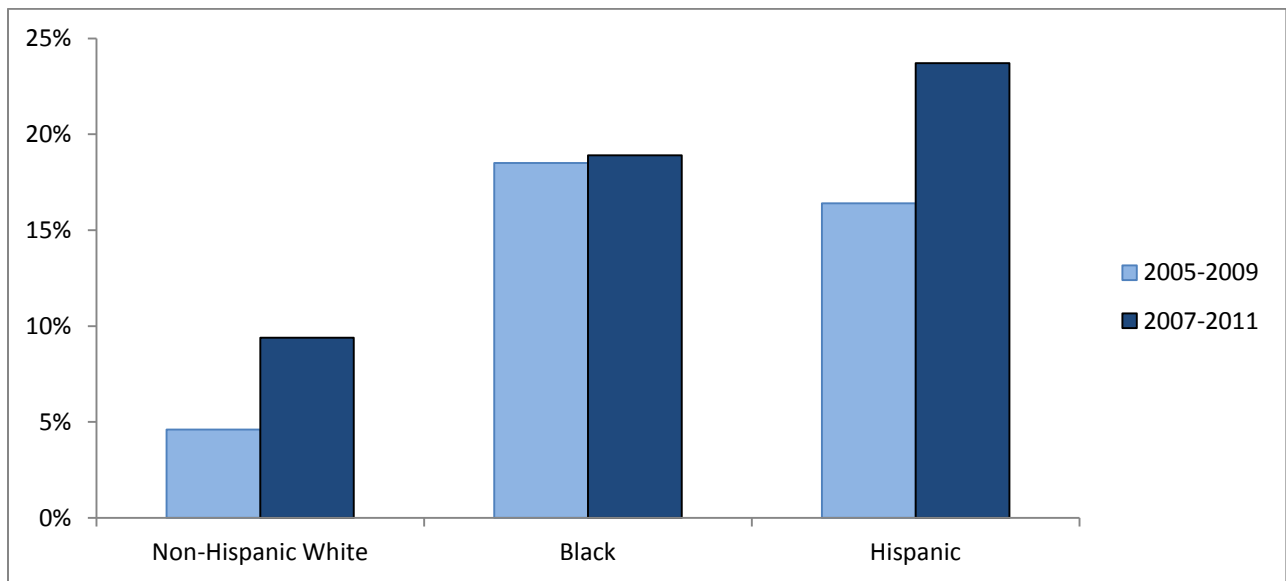
²⁷ Kids Count Data Center <http://datacenter.kidscount.org/data#GA/5/0>

²⁸ Children’s Issues In Newton Report <https://docs.google.com/file/d/0B3SuY1V9SSTUSFFLNDZKVjRIM1E/edit>



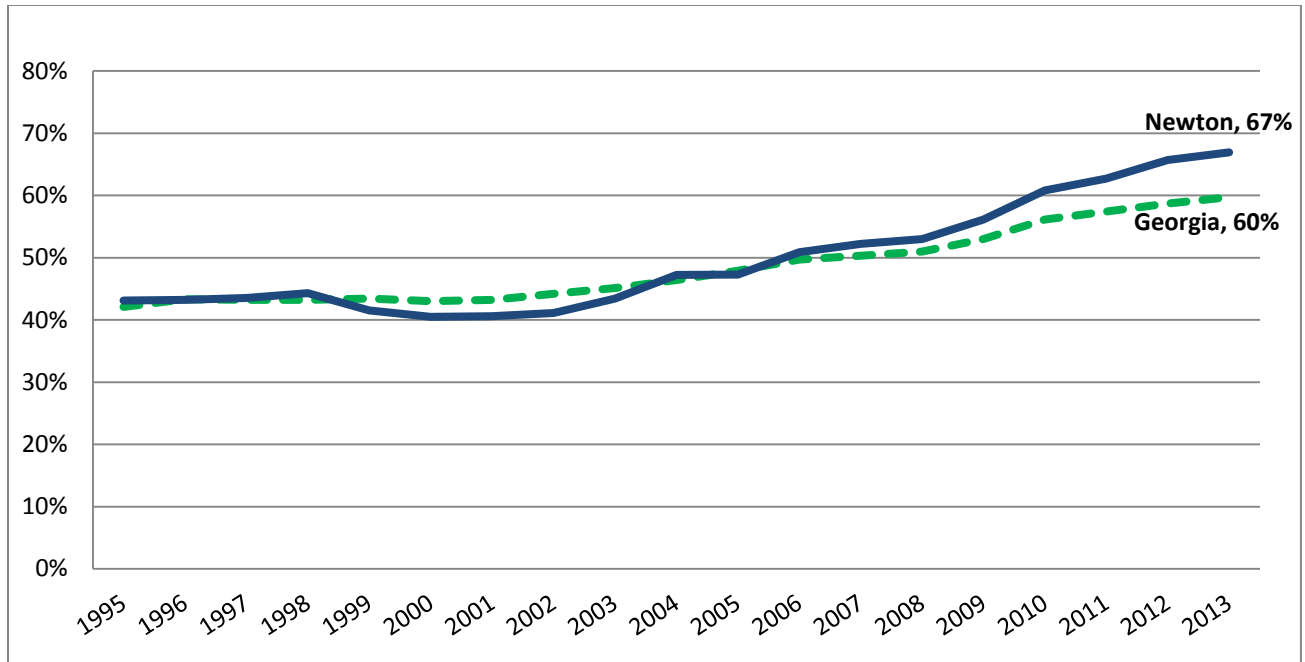
Source: U.S. Census Bureau, American Community Survey

Figure 11. Percent of People in Each Race/Ethnicity Group Living in Poverty, Newton County, 2005-2009 and 2007-2011



Source: U.S. Census Bureau, American Community Survey

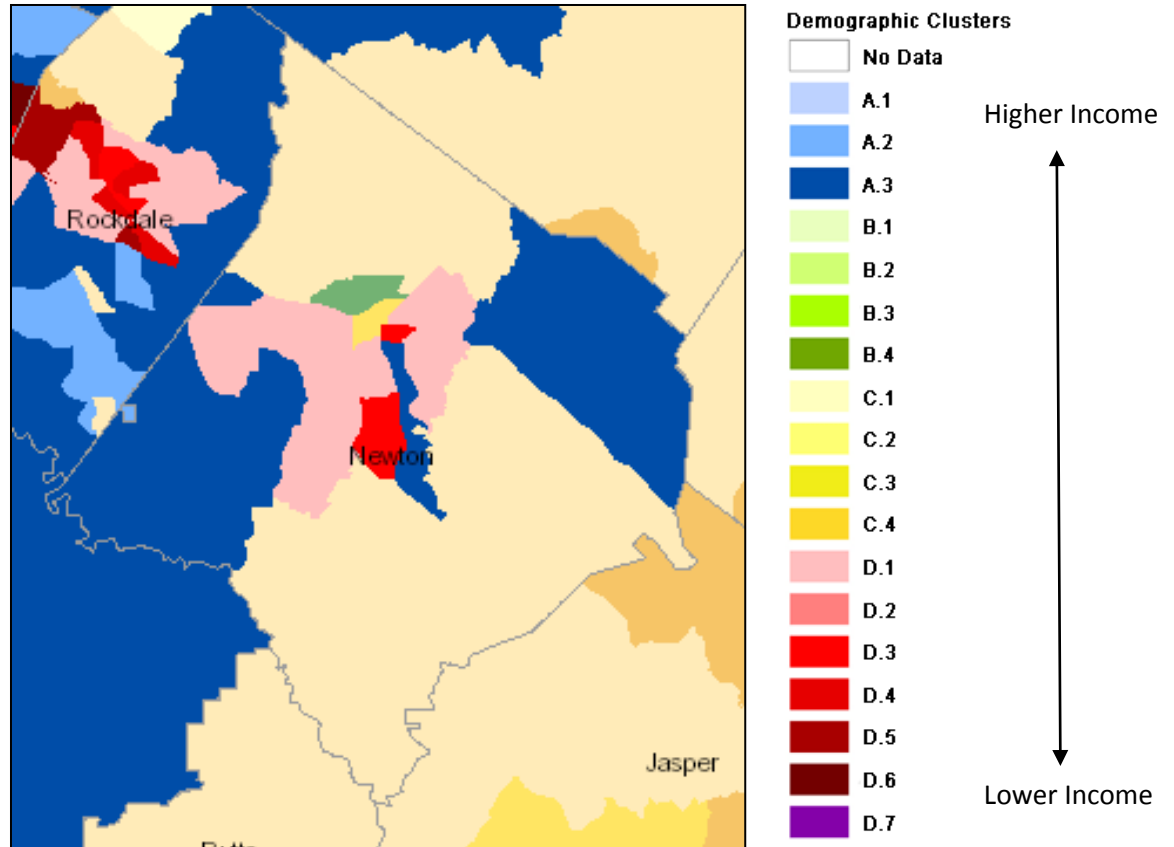
Figure 12. Percent of School Children Eligible for Free or Reduced Price Lunch, Newton County and Georgia, 1995-2013



Source: Kids Count Data Center <http://datacenter.kidscount.org/data#GA/5/0>

Demographic data suggest that some of the poverty in the county is clustered along the western and central areas of the county to the south of interstate 20, including part of the city of Covington (Figure 13).

Figure 13. Demographic clusters of Newton County, 2011



Source: <http://oasis.state.ga.us/GADemoProfile/DemoClusters2011.htm>

Detailed descriptions of demographic cluster groups are available at <http://oasis.state.ga.us/GADemoProfile/documents/DemoClusters2011Description.pdf>.

Blue colors represent higher income areas; yellow and red colors represent lower income areas.

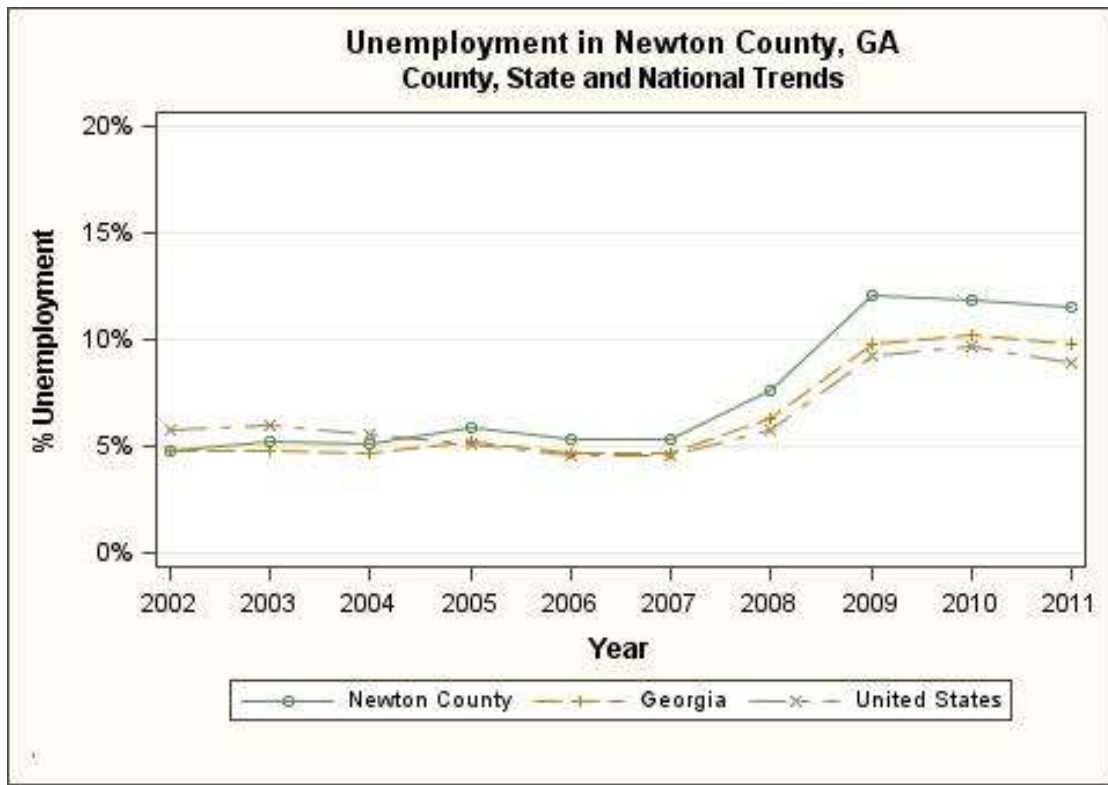
From 2007-2011, an estimated 82% of Newton households received earnings, 17% received retirement income other than Social Security, and 26% received Social Security. Some households received income from more than one source. The average annual income from Social Security was \$15,637. An estimated 4% of households received Supplemental Security Income (SSI; average \$9,763 per year) and 13% received Food Stamp/SNAP benefits.

Since 2007, unemployment has become a major problem for Newton County, as it has for much of the nation. According to the Robert Wood Johnson Foundation, job loss and unemployment are linked to a number of health problems, including stress-related conditions like stroke and heart disease.²⁹ As of August 2013, the unemployment rate was estimated to be 9.3%, which was improved from the 2010 peak of over 12.5%, but still well above rates seen in the early 2000s (Figure 14). Unemployment rates in the county have been about 1 to 2 percentage points higher than the state unemployment rate since 2009.³⁰

²⁹ Robert Wood Johnson Foundation
http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2013/rwjf403360

³⁰ U.S. Bureau of Labor Statistics

Figure 14. Unemployment Rate in Newton County, Georgia, 1990-2013



Source: County Health Rankings

(<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>)

Basic Needs Resources

Several community resources exist to help meet resident’s basic food needs. The health department administers the Women, Infants, and Children (WIC) program, which provides nutrition education, breastfeeding support and supplemental foods to low income families.³¹ The Georgia Division of Family and Children Services (DFCS) of the Georgia Department of Human Services provides residents with food stamps through the Georgia Supplemental Nutrition Assistance Program (SNAP).³² The Community Food Pantry in Covington provides emergency food relief to individuals and families.³³ The Solid Rock Willing Helpers / Food Ministry gives food to “hurting, disabled and seniors in rural areas where help is not available at the present time.”³⁴

The Salvation Army location in Covington provides the following community services: a “family store, social services-food pantry, clothing assistance, rental/mortgage assistance, utility assistance,

³¹ Newton County Health Department <http://www.gnrhealth.com/services/clinical-services/women-infants-children-wic>

³² Georgia Division of Family and Children Services <http://dfcs.dhs.georgia.gov/food-stamps>

³³ Community Food Pantry <http://www.newtonlibrary.org/ir/community-food-pantry>

³⁴ Willing Helpers / Food Ministry <http://www.solidrockbaptist.com/191016>

prescription assistance, and disaster relief.”³⁵ DFCS provides Temporary Assistance to Needy Families (TANF); residents can apply at the county DFCS office.³⁶

Housing

Where we live is at the very core of our daily lives. Housing is generally an American family's greatest single expenditure, and, for homeowners, their most significant source of wealth. Given its importance, it is not surprising that factors related to housing have the potential to help—or harm—our health in major ways.

-Robert Wood Johnson Foundation, Report on Housing and Health³⁷

As noted by the Robert Wood Johnson foundation, housing can strongly affect health.

According to the U.S. Census Bureau, during 2007-2011, there were about 38,000 housing units in Newton County, 88% of which were occupied. Of the total number of housing units, about six of seven (86%) were single family houses. Multi-unit structures like apartment buildings were less common in Newton County than in Georgia or the United States. One in ten (10%) Newton County housing units were in multi-unit structures compared with 21% of those in Georgia and 26% of those in the United States. Five percent of Newton County housing units were mobile homes.

About three-quarters (75%) of Newton County housing units were owned and the rest were rented. More than one-third (38%) of housing units were built since 2000 and nearly two-thirds (64%) were built since 1990. Nearly nine in ten residents (88%) moved into their current household since 1990.

A relatively high percentage of Newton County residents are considered “cost burdened” when it comes to housing. The Department of Housing and Urban Development defines cost burdened households as those who pay more than 30% of their income for housing. People in these households may have difficulty affording necessities like food, transportation, and medical care. From 2007-2011, the median monthly housing cost in Newton County was \$1,362 for mortgage owners and \$376 for non-mortgage owners. Forty percent of owners with mortgages and about one in eight (13%) owners were considered cost burdened. The median monthly housing cost for renters was \$942, and nearly two-thirds (64%) spent 30% or more of their household income on rent, which was much higher than the national average of 47%.

Housing foreclosures have been a major problem for many Newton County residents in recent years. According to data from the Federal Reserve Bank of Atlanta, Newton County had one of the top 5

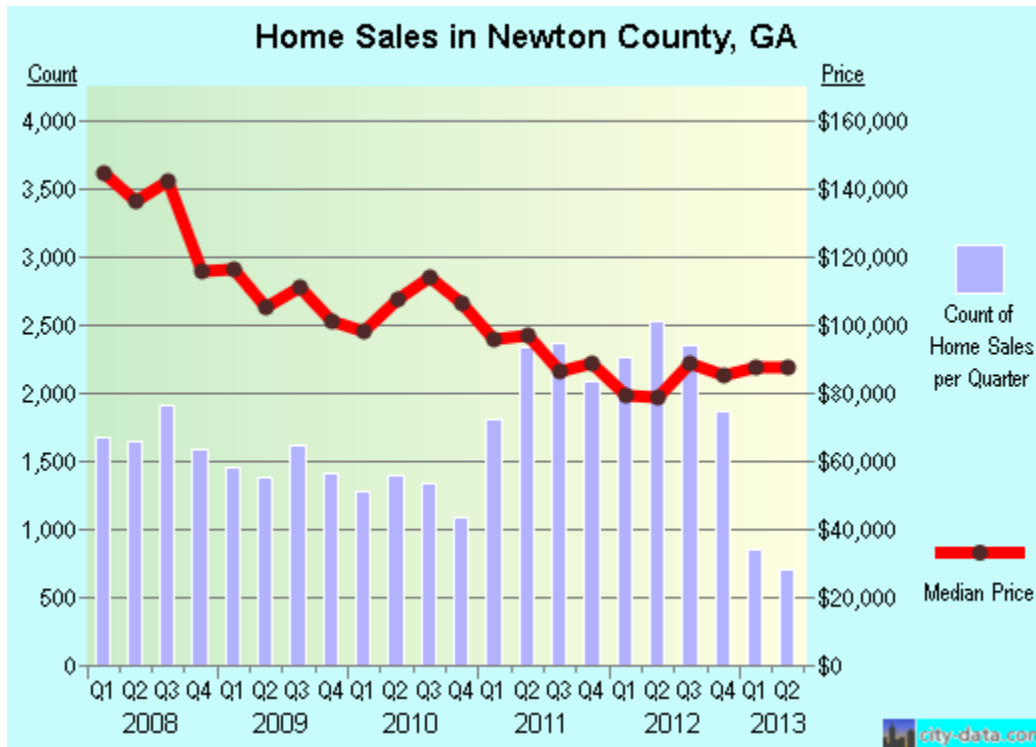
³⁵ Salvation Army <http://www.salvationarmy-georgia.org/SearchDetail.asp?Zip=30015>

³⁶ Newton County DFCS Office <http://dfcs.dhs.georgia.gov/newton-county-dfcs-office>

³⁷ Robert Wood Johnson Foundation, Report on Housing and Health
<http://www.rwjf.org/en/research-publications/find-rwjf-research/2011/05/housing-and-health.html>

highest foreclosure rates among the 159 Georgia counties in every quarter of 2011.³⁸ Related to the foreclosure trend, prices from home sales have declined substantially since 2008 (Figure 15). According to the American Communities Survey, the median value of owner-occupied housing units from 2007-2011 was \$144,500.

Figure 15. Home Sales in Newton County, Georgia, 2008-2013



Source: http://www.city-data.com/county/Newton_County-GA.html

No estimates of Newton County’s homeless population are available. The Garden of Gethsemane serves as a community resource by operating a homeless shelter in Covington.³⁹

The Newton County 2006-2028 Comprehensive Plan states, “county officials need to ensure that workforce housing continues to be available in the future.”⁴⁰ The plan encourages a specific type of development: “traditional neighborhood developments,” which “offer a variety of housing types in a dynamic mixed-use environment that helps to reduce auto trips and create a strong sense of place that can help make Newton unique.” This type of neighborhood development yields positive health benefits by making walking part of the daily routine and facilitating interpersonal interactions.⁴¹ It is discussed more in the Transportation and Land Use section.

³⁸ Federal Reserve Bank of Atlanta <http://www.frbatlanta.org/pubs/mdft/>

³⁹ Garden of Gethsemane homeless shelter <http://www.rainbowcommunityctr.org/>

⁴⁰ Newton County 2006-2028 Comprehensive Plan: Community Assessment <http://www.dca.state.ga.us/development/PlanningQualityGrowth/programs/documents/NewtonCo.CAss.pdf>

⁴¹ Does the Built Environment Influence Physical Activity? Transportation Research Board, Institute of Medicine <http://onlinepubs.trb.org/onlinepubs/sr/sr282.pdf>



Housing in Orchard Park, Newton County

Source: Newton County Community Agenda

<http://www.dca.state.ga.us/development/PlanningQualityGrowth/programs/documents/NewtonCo.CAg.pdf>

Education and Child Activities

Everyone knows that without a good education, prospects for a good job with good earnings are slim. Few people think of education as a crucial path to health, however. Yet a large body of evidence strongly—and, with very rare exceptions, consistently—links education with health, even when other factors like income are taken into account.

-Robert Wood Johnson Foundation, Report on Education and Health⁴²

The Newton County School System serves the entire county including five municipalities and includes 13 elementary schools, 5 middle schools, 3 high schools, 1 theme school (grades K-6), 2 charter schools, and the Ombudsman Alternative Education Program. All are fully accredited by the Southern Association of Colleges and Schools.⁴³ Their mission is to “provide educational excellence for all

⁴² Robert Wood Johnson Foundation

http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2011/rwjf70447

⁴³ Newton County Schools <http://www.newtoncountyschools.org/about.aspx>

students.” The school system is supported by the Newton Educational Foundation, a non-profit foundation that “is working to create a culture of support for education in Newton County, and who’s vision is to “create a better community.”⁴⁴

The 2012 four-year cohort graduation rate was 76%, which was higher than the Georgia rate of 70%,⁴⁵ but lower than the national rate of 78% in 2010, the most recent year for which data are available.⁴⁶ Alcovy High School had a four-year graduation rate of 74%, Newton High School had a rate of 83%, and Eastside High School had a rate of 87%. From 2007-2011, an estimated 84% of Newton County residents 25 years and older were high school graduates, which matched the percentage for Georgia and was slightly lower than the national rate (85%). About one in five (19%) residents age 25 years and older had a bachelor’s degree or higher.⁴⁷ By comparison, 28% of both Georgia and U.S. residents held a bachelor’s degree.

Transportation and Land Use

Transportation decisions affect our individual lives, economy and health. Everyone needs to use various modes of transportation to get to work or school, to get medical attention, to access healthy foods at grocery stores and markets, and to participate in countless other activities every day.

-American Public Health Association⁴⁸

Transportation

In a community assessment done as part of the Newton County Community Agenda in 2008, “a large percentage of those that took the survey stated that the top issue was mitigating increasing traffic congestion.”⁴⁹

The average travel time to work in Newton County from 2007-2011 was estimated to be 32.4 minutes, which was longer than the Georgia average of 27.0 and about 50% higher than the national average of 22.6 minutes. According to the Healthy Communities Institute, these lengthy commutes cut into workers’ free time and can contribute to health problems like headaches, anxiety, and increased blood pressure. Longer commute times also require workers to consume more fuel, which is both expensive to workers and damaging to the environment.

⁴⁴ The Newton Educational Foundation <http://reimaginewton.org/>

⁴⁵ Georgia Department of Education <http://www.gadoe.org/External-Affairs-and-Policy/communications/Documents/2012%204%20Year%20Cohort%20Graduation%20Rate.pdf>

⁴⁶ U.S. Department of Education <http://nces.ed.gov/pubs2013/2013309rev.pdf>

⁴⁷ U.S. Census Bureau

http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_11_5YR_DP02

⁴⁸ American Public Health Association <http://www.apha.org/advocacy/priorities/issues/transportation>

⁴⁹ Newton County Community Agenda <http://www.dca.state.ga.us/development/PlanningQualityGrowth/programs/documents/NewtonCo.CAg.pdf>

Three percent of households did not have access to a car, truck or van for private use. Thirty-one percent of households had one vehicle.

The Newton County 2006-2028 Comprehensive Plan identified several key transportation issues.⁵⁰

1. **No County Transit System.** There is not a public transit system in Newton County. The community should study the opportunities for express bus routes and vanpooling.
2. **Lack of adequate traffic signals.** There are many all-way stops in the community that need to be signalized and existing signals should be synchronized. This would help to reduce queuing.
3. **Mitigating increasing traffic congestion.** Traffic congestion is going to get worse as the county grows. Steps need to be emplaced to slow the increase in congestion including requiring street connectivity and conducting traffic studies.
4. **Poorly connected or incomplete pedestrian network.** There are ordinances in place to promote sidewalk construction as a part of new development, but the network is disconnected. The County should identify future collector streets to be built as development occurs

The Newton County Medical Center CHNA reported that many people in the community cited transportation as a major issue preventing access to care, particularly the lack of a public transportation system.⁵¹ One community member reported that EMS receives inappropriate calls for transportation to doctor appointments because there is no public transit.

Seniors who are unable to drive have few transportation options; however, Newton County Senior Services provides some transportation services for a small fee and meal-delivery for homebound seniors.⁵²

Land Use

Future land development, which is tightly connected to transportation, is of great interest to many Newton County residents. While most development halted during the Great Recession, development is likely to resume and the mode of development going forward will greatly impact health. Several community plans have examined these issues and a brief summary is presented here.

The Newton County 2006-2028 Comprehensive Plan, released in 2006, found that the following issues contribute to traffic congestion in the county.

⁵⁰ Newton County 2006-2028 Comprehensive Plan: Community Assessment

<http://www.dca.state.ga.us/development/PlanningQualityGrowth/programs/documents/NewtonCo.CAss.pdf>

⁵¹ Newton County Medical Center CHNA

<http://www.newtonmedical.com/pdf/Newton%20Final%20Report2013.pdf>

⁵² Newton County Senior Services <http://co.newton.ga.us/content/view/31/31/>, phone 770 787-0038

1. **Suburban Sprawl.** Most of the recent development in the County over the past 10 years has occurred in a typical suburban land use pattern. Most of the new development associated with this pattern is single-family residential spread out in a leap-frog fashion. Retail and employment opportunities are primarily relegated to Covington, and surrounding counties, such as Rockdale, forcing more and more residents to drive longer distances.
2. **Strip Commercial Development.** The land uses along some highway corridors form stereotypical commercial strips that detract from the rural character and regional identity.

Newton 2050 Plan

The Center for Community Preservation and Planning of Newton County, which calls itself “a neutral place for collaborative planning,” was started by a group of citizens who “believed that growth could be managed and accepted in a way that would improve quality of life for old and new residents.”⁵³ A Leadership Collaborative, working with The Center and with community input, developed the Newton County 2050 Plan, which “identifies a strategy to shape the county’s impending growth to ensure [the] county remains a desirable place to live.”⁵⁴ The Plan notes that, “at this precise moment in time, Newton County is literally straddling the line between urban/suburban and rural. Rural communities typically accept and absorb the development pressures from neighboring metropolitan areas and passively become hallmarks of urban sprawl. Not here.”⁵⁵

⁵³ The Center for Community Preservation and Planning <http://www.centernewton.org/about/>

⁵⁴ The Center <http://www.centernewton.org/plan/terms-defined/>

⁵⁵ Newton 2050 Plan <http://www.2050plan.org/>



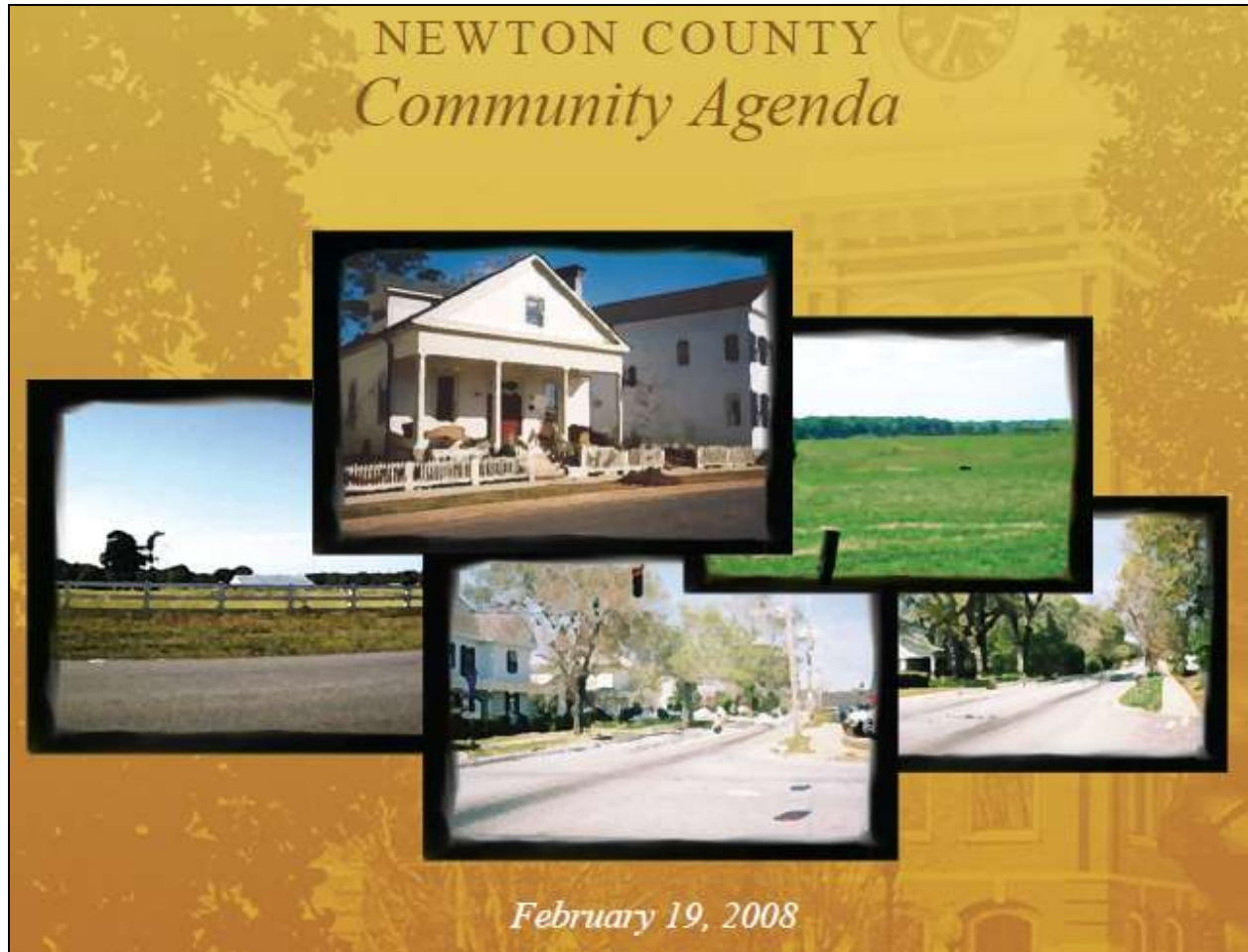
The Newton 2050 Plan

Source: <http://www.2050plan.org/the-plan/>

According to the website, the Newton 2050 Plan will create a healthier lifestyle by better positioning schools to serve their communities, “giving children and families an opportunity to exercise on their way to and from school and increased access to facilities during the summer and weekend hours.”⁵⁶ It will also increase parental involvement because “parents will get more involved in schools if they are convenient to home.” The website also highlights a senior apartment development near Downtown Covington and suggests that this sort of development allows seniors to retain independence even after they lose the ability to drive, which is otherwise associated with depression and health complications.

The Newton County Community Agenda

⁵⁶ Newton 2050 Plan <http://www.centernewton.org/plan/the-2050-plan/>



The Newton County Community Agenda, released in 2008, is a comprehensive community plan based on a two year planning effort with extensive public outreach and many public workshops. This plan shares similar goals as the Newton 2050 plan, including “preservation of the County’s natural resources and rural character while still accommodating balanced growth that provides ‘opportunities for citizens to live, work, shop, and play in a safe, connected, and fiscally responsible community.’”⁵⁷ The plan reports that the public involvement process selected “village center” model as the preferred development option. “This plan calls for promoting a village pattern of development that has long been the cornerstone of building a sense of identity for small towns and rural places.”

According to the report, the advantages of the Village Concept include:

- **A sense of place** – The village form provides a strong architectural design theme that gives the community an attractive identity and sense of place that typical suburban subdivision development lacks.

⁵⁷ Newton County Community Agenda
<http://www.dca.state.ga.us/development/PlanningQualityGrowth/programs/documents/NewtonCo.CAg.pdf>

- **More efficient use of land** – Clustering daily activities in the activity centers creates a mixture and arrangement of land uses that makes a more efficient use of land than the typical suburban subdivision. A village of 10,000 persons can easily be accommodated on as little as 1,400 acres, compared to over 4,500 acres for a subdivision comprised of 1-acre lots. Therefore each village of 10,000 persons saves 3,000 acres that can remain in greenspace, forest, agriculture, and other rural uses that will preserve the county’s rural character. Such rural uses require little or no additional infrastructure investment.
- **More efficient use of infrastructure** – An activity center brings development and infrastructure together in a balanced way. The capacity of basic urban services such as water, sewer, public safety and transportation are matched efficiently with the arrangement of homes, schools, shops and offices. It also makes it possible to reduce the total amount of land area that will require urban services. By contrast, unplanned growth leads to a widely scattered pattern of low-density development that spreads county infrastructure over large sectors of the county but does not make efficient use of what is built. This pattern of growth can be extremely expensive to serve, especially as systems require more maintenance with age.
- **Less vehicular traffic** – The village core clusters the daily activities of home, school, shopping and play and orients them around a walkable network of streets, sidewalks, trails and greenways. This form is designed to shorten trip distances, encourage walking and cycling and reduce the dependency of people on their cars.
- **Public support** – Public workshops concerning Newton County’s future found strong support for the village concept as an alternative to the continuation of current trends of dispersed development. People understood that through activity centers Newton County can accommodate growth while creating a sense of place, reducing traffic and conserving rural character.

Given the large burden of chronic diseases in Newton County related to physical inactivity, development that promotes walking and cycling would likely yield important benefits in overall health. Since depression and many other mental health problems can be helped by physical activity and interpersonal connections, forms of development that foster walking and social interaction will likely yield benefits for mental health as well.

Environment

According to the County Health Rankings, Newton’s physical environment ranked 130th of the 159 Georgia counties. The Healthy Communities Institute defines the physical environment as all places where we live and work (e.g., homes, buildings, streets, and parks). The environment influences a person’s level of physical activity and ability to have healthy lifestyle behaviors. For example, inaccessible or nonexistent sidewalks or walking paths increase sedentary habits. These habits contribute to obesity, cardiovascular disease, and diabetes. Other factors that contribute to healthy lifestyle behaviors are access to grocery stores and recreation facilities.

Access to Healthy Foods

In 2009, the county had 19 grocery stores (20 grocery stores per 100,000 population), which was similar to the nationwide county average of 21 per 100,000.⁵⁸ There are strong correlations between the density of grocery stores in a neighborhood and the nutrition and diet of its residents. According to the U.S. Department of Agriculture, an estimated 25,557 Newton County residents (including 7,521 children and 2,194 seniors) had low access to a grocery store in 2010 and an estimated 619 households had no car and low access to a grocery store. About 8% of low-income residents had low access to a grocery store compared with 6% nationwide.

People who live in certain areas of Newton County have less access to fresh foods than others. The U.S. Department of Agriculture defines a food desert as a census tract with a substantial share of residents who live in low-income areas and have low levels of access to a grocery store or a healthy, affordable food retail outlet.⁵⁹ Two areas within the central part of the county, including part of Oxford and Covington, are considered to be food deserts (Figure 16). The Newton Partnership describes how an area with several grocery stores becomes designated a “food desert” and how food insecurity, or hunger, is related to obesity and poor health.⁶⁰

According to the Newton Partnership, the county has a few community gardens, including one in Porterdale that was initiated by HANDS-ON NEWTON and was embraced by the mayor and other citizens.⁶¹

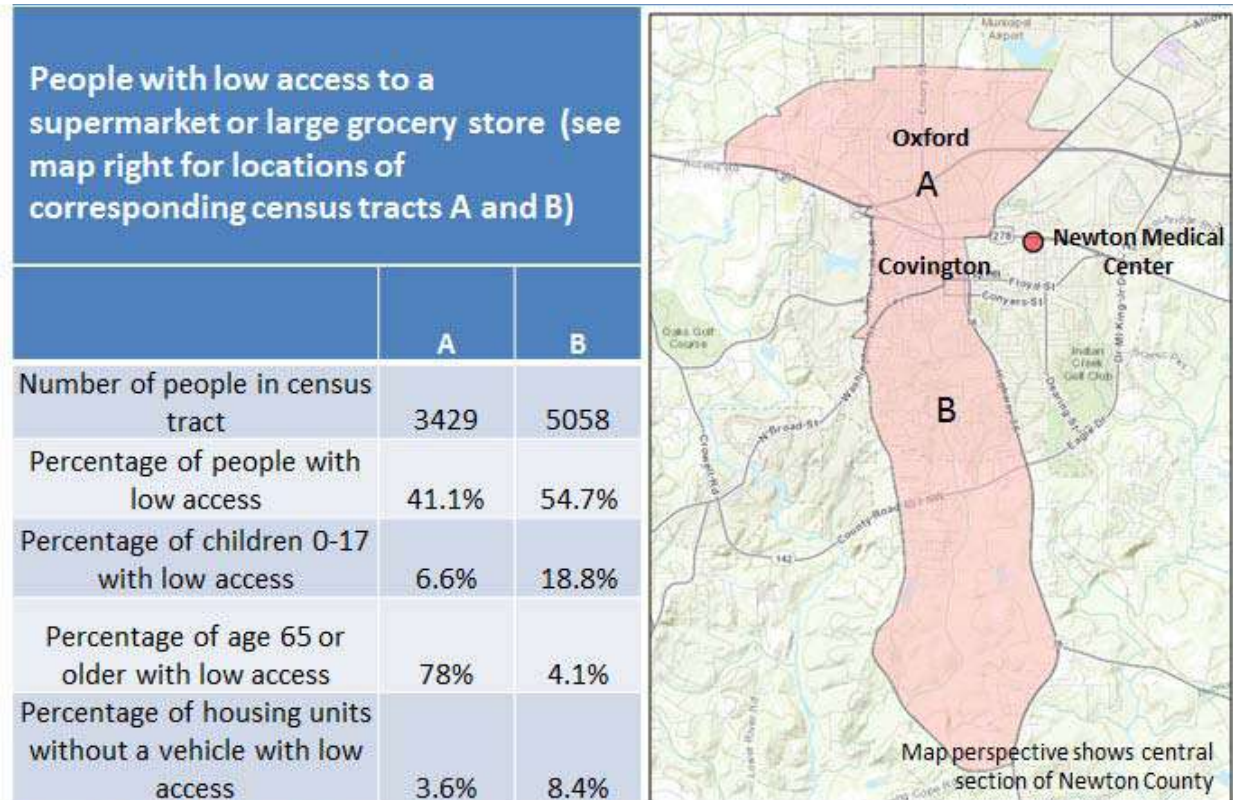
⁵⁸ U.S. Department of Agriculture Economic Research Service <http://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas.aspx#.Um68NnC-qtE>

⁵⁹ U.S. Department of Agriculture <http://apps.ams.usda.gov/fooddeserts/>

⁶⁰ Newton Partnership—Food Desert <http://www.newtonpartnership-gafcp.org/hunger-obesity-in-food-desert/>

⁶¹ Newton Partnership—Food Desert <http://www.newtonpartnership-gafcp.org/hunger-obesity-in-food-desert/>

Figure 16. Food Deserts in Newton County, Georgia



Above data is based on the 2000 census and the compilation of a 2006 supermarket survey
 Data Source: United States Department of Agriculture, Food Desert Locator

Reproduced from Newton Medical Center Community Health Needs Assessment
<http://www.newtonmedical.com/pdf/Newton%20Final%20Report2013.pdf>

Fast Food

In 2009, Newton County had a density of fast food restaurants that was slightly lower than the national average (48 vs. 57 per 100,000).⁶² According to the Healthy Communities Institute, “fast food is often high in fat and calories and lacking in recommended nutrients.... studies suggest that fast food outlets strongly contribute to the high incidence of obesity and obesity-related health problems.”⁶³

Liquor Stores

In 2006, Newton County had a liquor store density of about 7 per 100,000 population, which was lower than the national average of 11 per 100,000. Studies have shown that neighborhoods with a high density of alcohol outlets are associated with higher rates of violence, regardless of other community

⁶² U.S. Department of Agriculture Economic Research Service <http://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas.aspx#.Um68NnC-qtE>

⁶³ Healthy Communities Institute <http://www.healthypasodelnorte.org/modules.php?op=modload&name=NS-Indicator&file=indicator&iid=1122582>

characteristics like poverty and age of residents. High alcohol outlet density has been shown to be related to increased rates of drinking and driving, motor vehicle-related pedestrian injuries, and child abuse and neglect.

Parks and Recreation

Newton had an estimated 9 recreation or fitness facilities per 100,000 residents in 2009, which was higher than the national average of 7 per 1,000.⁶⁴ The Newton County Recreation Commission is implementing a master plan with a focus on the following primary activities:

- Softball
- Baseball
- Multi-use courts
- Tennis courts
- A Trail System for biking, walking, running and fitness
- Passive use opportunities
- Senior center meeting space
- Picnic area
- Seating in parks
- Tot-lots/playgrounds

These priorities for Newton County parks were based on “existing recreational facilities, projected population growth patterns, public recommendation, management strategies, and suggestions as to improving efficiency to an expanding park system in Newton County.”⁶⁵

The Covington Family YMCA is also place for recreation and exercise in Newton County.⁶⁶

Water Safety

According to the Safe Drinking Water Information System cited in the County Health Rankings, drinking water safety in Newton County was good. In fiscal year 2012, no residents were reported to have been exposed to water exceeding a violation limit.⁶⁷

The county’s rivers and streams, however, are less healthy. According to the Newton County 2006-2028 Comprehensive Plan,⁶⁸ written in 2006, surface water quality was in decline:

⁶⁴ U.S. Department of Agriculture Economic Research Service <http://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas.aspx#.Um68NnC-qtE>

⁶⁵ Newton County Recreation Commission <http://www.newtonrecreation.com/Home/OrganizationStrategicPlanning.aspx>

⁶⁶ Covington Family YMCA <http://www.ymcaatlanta.org/locations/facility/branches/cvy/branchhome.shtml>

⁶⁷ County Health Rankings <http://www.countyhealthrankings.org/app/home>

Four of the county's significant streams and rivers do not meet federal water quality standards. Lake Jackson in south Newton County is also in violation of clean water standards, in large part due to these impaired streams and rivers. None of these streams originate in Newton County, and all are impaired by the time they reach the County. Several large urban areas are upstream of Newton County, as are a number of active agricultural areas. Much of the pollution generated is due to urban and rural non-point source runoff, but wastewater from industrial and municipal uses also contribute to substandard water quality.



Lake Jackson

Source: Newton County 2006-2028 Comprehensive Plan: Community Assessment

<http://www.dca.state.ga.us/development/PlanningQualityGrowth/programs/documents/NewtonCo.CAss.pdf>

Participants in surveys for the 2008 Newton County Community Agenda “identified air and water quality as very important and put both as a top priority for the County.”⁶⁹

Air Quality

The Newton County 2006-2028 Comprehensive Plan also noted that the county was one of 21 metropolitan Atlanta counties with poor air quality. “The County along with the region does not meet federal clean air standards for particulate matter or ground-level ozone. Regionally, the bulk of the problem originates with high traffic volumes, often traveling relatively long distances in congested operating conditions.”⁷⁰ The report further identified several ongoing trends that would likely exacerbate the county's air quality problem:

- Increased development – commercial and residential
- New developments continue to focus on travel by motor vehicle
- Segregation of land uses
- Poor street connectivity/cul-de-sac and dead-end streets
- Lack of pedestrian or bicycle facilities
- Lack of adequate job opportunities in the County

⁶⁸ Newton County 2006-2028 Comprehensive Plan: Community Assessment

<http://www.dca.state.ga.us/development/PlanningQualityGrowth/programs/documents/NewtonCo.CAss.pdf>

⁶⁹ Newton County Community Agenda

<http://www.dca.state.ga.us/development/PlanningQualityGrowth/programs/documents/NewtonCo.CAg.pdf>

⁷⁰ Newton County 2006-2028 Comprehensive Plan: Community Assessment

<http://www.dca.state.ga.us/development/PlanningQualityGrowth/programs/documents/NewtonCo.CAss.pdf>

- Loss of tree canopy

The Comprehensive Plan states, “stemming these trends will require a multi-faceted campaign of zoning and land development regulation reform, public education, and intergovernmental coordination between all government entities in the region.”

Safety

Violent Crime Rate

The Newton County violent crime rate of 395 per 100,000 residents in 2011 was higher than the Georgia rate (366 per 100,000).⁷¹ The property crime rate of 3,200 per 100,000 in Newton County was lower than the statewide rate of 3,556 per 100,000. The Newton County Sheriff’s Office is “dedicated and committed to enforcing the laws enacted for the Protection of the Lives’, Person’s, Property, Health, and Morals of all citizens in Newton County.” The office is “committed to improving the quality of life in [the] community.”⁷²

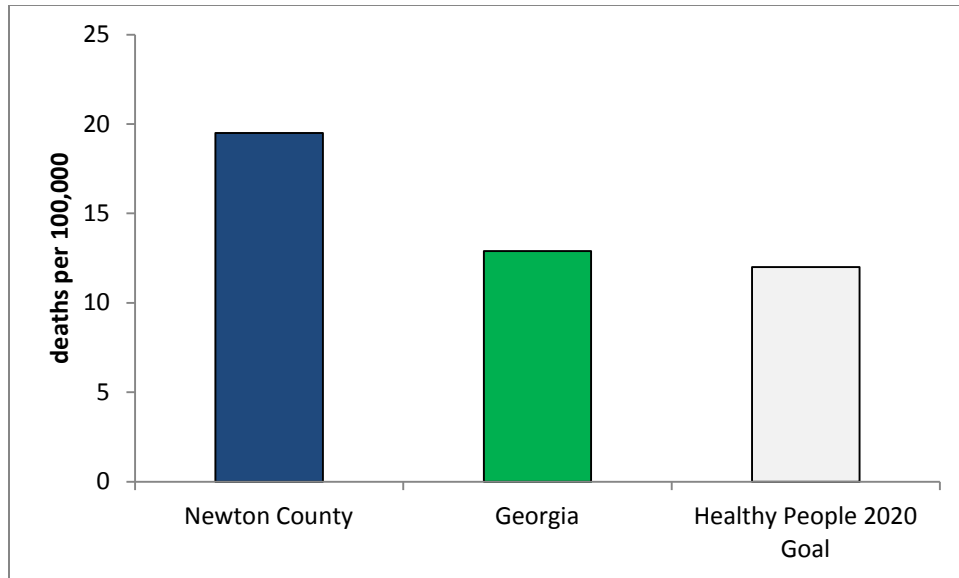
Motor Vehicle Collisions

Motor vehicle-related injuries kill more children and young adults than any other single cause in the United States. From 2009-2011, Newton County had an age-adjusted death rate due to motor vehicle collisions (19.5 per 100,000) that was higher than the Georgia rate (12.9 per 100,000) and the Healthy People 2020 goal of 12 per 100,000 (Figure 17). For the years 2006-2008, the Newton County rate had been 17.5 per 100,000. As noted in the Transportation and Land Use section, new modes of development can improve (or worsen) traffic safety depending on the mode of development.

Figure 17. Age-Adjusted Death Rate Due to Motor Vehicle Collisions per 100,000 residents, 2009-2011

⁷¹ Georgia Statistics System <http://georgiastats.uga.edu/crossection.html>

⁷² Newton County Sheriff’s Office <http://www.newtonsheriffga.org/>



Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Poisoning

According to Poison Prevention.org, more than 2 million poisonings are reported each year in the United States and the majority of non-fatal poisonings occur in children younger than six years old. Poisonings are one of the leading causes of death among adults.⁷³ From 2009-2011, 31 deaths in Newton County were caused by poisoning.⁷⁴ Georgia Poison Control operates a 24-hour emergency treatment information service (<http://www.georgiapoisoncenter.org/>, 800-222-1222).

⁷³ Poison Prevention.org <http://www.poisonprevention.org/>

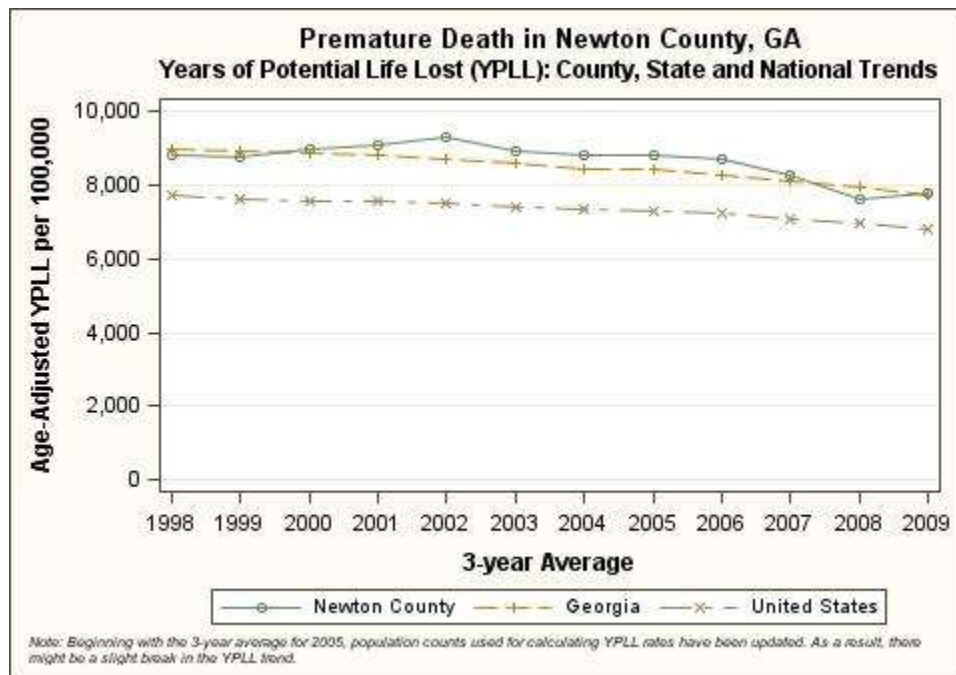
⁷⁴ OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Section Two: Health Status

Overall Health

Newton County is relatively healthy compared with other counties in Georgia, but still has a great deal of room for improvement, particularly when compared to the national level. According to the 2013 County Health Rankings, Newton County ranked 33rd among the 159 Georgia counties in terms of overall health outcomes.⁷⁵ The county ranked 34th by measures of illness and disability (morbidity) and 40th by a measure of premature death (mortality). In 2013, Newton County had 7,784 age-adjusted years of potential life lost per 100,000 residents, which was nearly equal the state rate of 7,697 per 100,000 (Figure 18).

Figure 18. Premature Death in Newton County, GA, 1998-2009



Source: County Health Rankings

<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

An estimated 17% of Newton County residents reported their health to be poor or fair, which was similar to the statewide rate of 16%.⁷⁶ Similarly, Newton County residents reported an average of 3.4 days of poor physical health per month—about the same as the Georgia figure (3.5 days). Newton

⁷⁵ County Health Rankings for Newton County, Georgia

<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

⁷⁶ County Health Rankings for Newton County, Georgia

<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

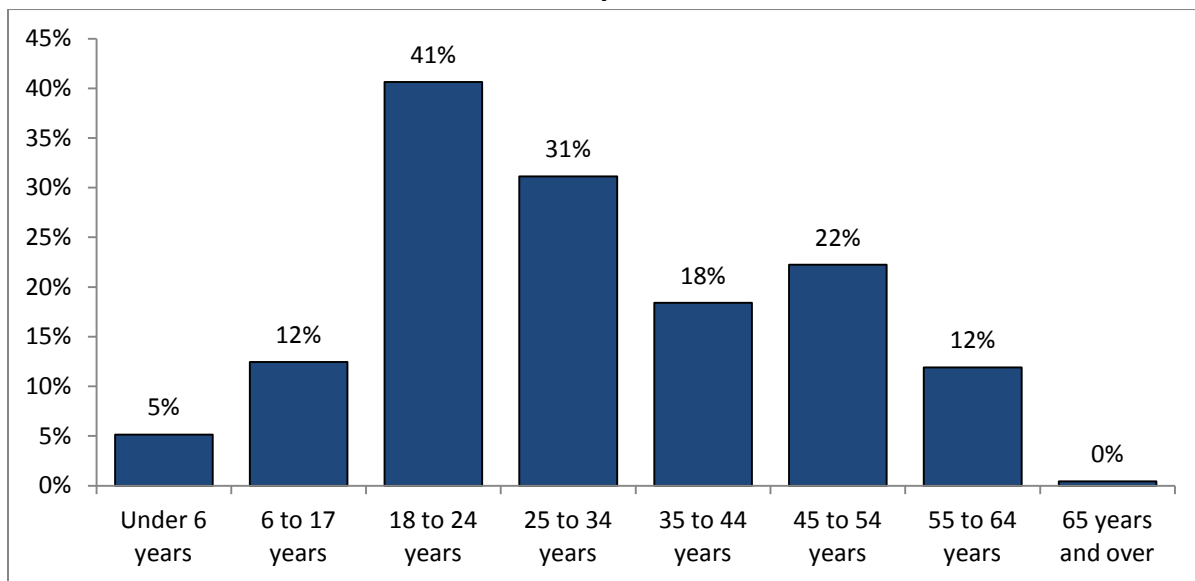
County residents reported a lower average number of poor mental health days (2.7 per month) than did statewide residents (3.4 days).

Access to Health Services

Clinical care is an important part of maintaining good health. The County Health Rankings estimates that about 20% of a community’s health status can be attributed to clinical care and ranks Newton County’s clinical care as 52nd out of the 159 Georgia counties, suggesting that room for improvement exists.⁷⁷

Whether a person has health insurance is a major factor in whether they have access to health services. In 2012, an estimated one in five (18%) Newton County residents lacked health insurance.⁷⁸ Ten percent of children under 18 years were uninsured compared with a national average of 7%. Nineteen percent of adults age 18-65 years were uninsured, which was slightly above the national average of 17%. Similar percentages of non-Hispanic White residents (16%) and Black residents (15%) were uninsured; estimates for other race/ethnic groups are not available. Over one-third (41%) of residents age 18 to 24 years were uninsured compared with less than 1% of residents 65 years and older (Figure 19).

Figure 19. Percentage of residents that are uninsured (estimated) by age group, Newton County, 2012



Source: U.S. Census Bureau, 2012 American Community Survey 1-Year Estimates

⁷⁷ County Health Rankings for Newton County, Georgia

<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

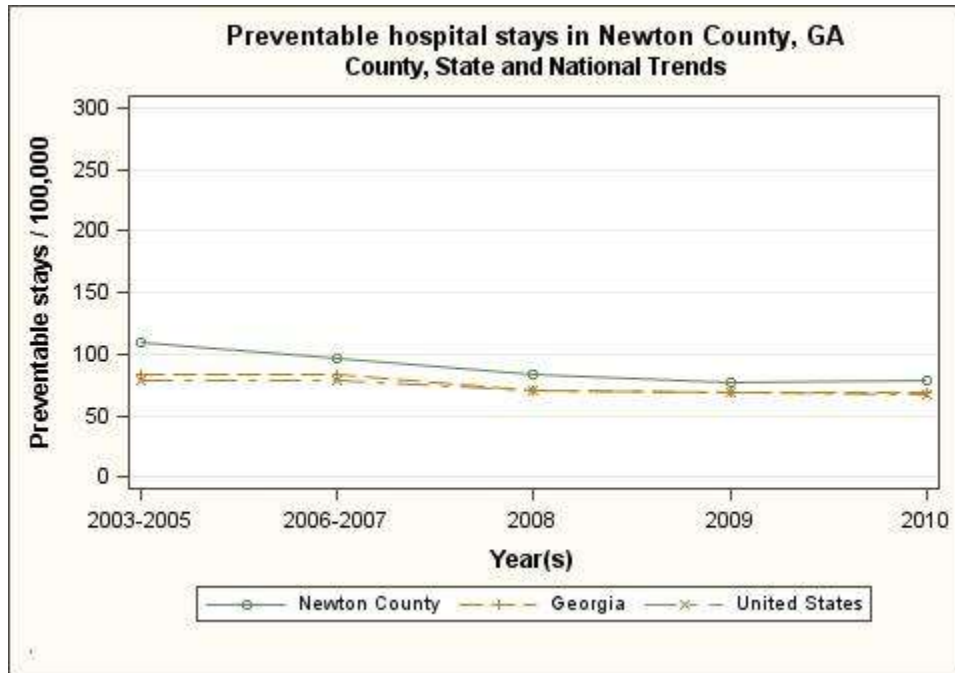
⁷⁸ U.S. Census Bureau, 2012 American Community Survey 1-Year Estimates

<http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml>

The ratio of residents to primary care physicians was 3,032:1, which was nearly twice as high as the statewide ratio of 1,611:1, suggesting that primary care services might be less accessible in the county than in other areas of the state. Similarly, there was an estimated 1 dentist per 6,367 residents, which meant that there were nearly three times fewer dentists per capita than the statewide ratio of 1 dentist per 2,249 residents.⁷⁹ The federal Health Resources and Services Administration (HRSA) designated Newton County as a health provider shortage area for dentists.⁸⁰

Newton County had a higher rate of preventable hospital stays than the state and the nation (Figure 20). Two indicators suggest that Medicare enrollees (who are mostly people age 65 years or older) receive above average care in the county. First, a higher percentage of diabetic Medicare enrollees in the county (89%) were screened with an HBA1c test, which is important for monitoring blood sugar control, than the overall percentage in Georgia (84%).⁸¹ Second, a higher percentage of female Medicare enrollees received mammography screening in the county (68%) than the overall rate in Georgia (64%).

Figure 20. Preventable Hospital Stays in Newton County, Georgia, 2003-2010



Source: County Health Rankings

<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

⁷⁹ County Health Rankings for Newton County, Georgia
<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

⁸⁰ Health Resources and Services Administration <http://hpsafind.hrsa.gov/HPSASearch.aspx>

⁸¹ County Health Rankings for Newton County, Georgia
<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

Newton County has one major hospital: Newton Medical Center.⁸² The county also has many outpatient health care providers, urgent care centers, and several nursing homes.⁸³

The county has one free or sliding scale clinic. Willing Helpers Medical Clinic is located in Covington and offers basic primary care services.⁸⁴ The clinic only sees uninsured Newton County residents and appointments are required.

The Health Department provides a range of health care services, including immunizations, family planning, child health exams, treatment of sexually transmitted diseases, and breast and cervical cancer screening.⁸⁵

School-based health centers (SBHC), which deliver medical care to children at schools, have been successful elsewhere in the state and country and could be a useful way to expand health care access in Newton County. The Newton County SBHC Initiative is a collaboration of community partners, including Newton County Schools, Newton Medical Center, the Health Department, the Newton County Community Partnership, Emory University, and the Health Department, and the national parent organization.⁸⁶ They are currently assessing the need for SBHCs in Newton County.

Health Behaviors

As noted in the background section, most of the top ten risk factors for premature death, disease, and disability in the United States are health behaviors—or are closely linked to health behaviors—that lead to chronic diseases.⁸⁷ For this reason, we must focus attention on health behaviors to make the biggest improvements in health in Newton County. We must also recognize that people’s health behaviors are strongly influenced by biological factors like addiction, as well as the environment, and public policy.⁸⁸

Newton County has a great deal of room for improvement when it comes to health behaviors. The county’s health behavior ranking (**90th of 159 counties**) places it in the bottom half of Georgia counties.

Top 10 Risk Factors for Illness and Premature Death

- Poor diet (dietary risks)
- Smoking (tobacco)
- Overweight and obesity
- High blood pressure
- Diabetes and pre-diabetes
- Physical inactivity
- Alcohol use
- High cholesterol
- Drug use
- Air pollution (specifically particulate matter)

⁸² Newton Medical Center <http://www.newtonmedical.com/>

⁸³ Available in Resource Listing section <http://www.newtonmedical.com/pdf/Newton%20Final%20Report2013.pdf>

⁸⁴ Willing Helpers Medical Clinic <http://www.solidrockbaptist.com/479779>

⁸⁵ Gwinnett Newton Rockdale County Health Departments <http://www.gnrhealth.com/services>

⁸⁶ SBHC Report for Newton County <https://docs.google.com/file/d/0B3SuY1V9SSTUbmFjWGgzZnhDaWs/edit?pli=1>

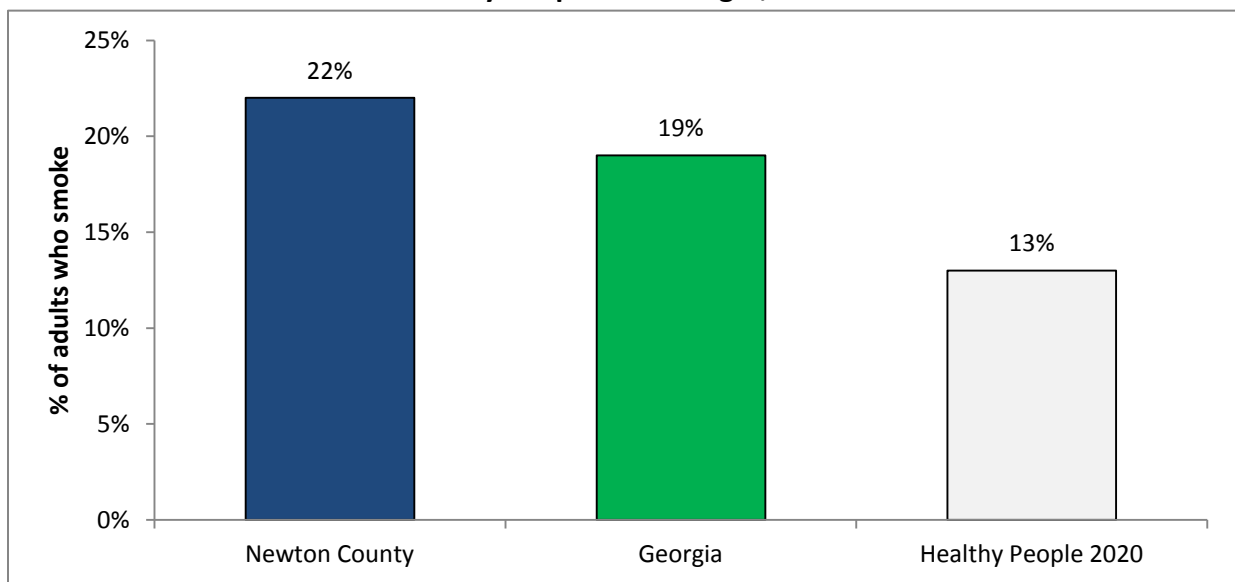
⁸⁷ IMHE <http://www.healthmetricsandevaluation.org/gbd/visualizations/gbd-arrow-diagram>

⁸⁸ Health and Behavior: The Interplay of Biological, Behavioral, and Societal Influences. National Academy of Sciences http://www.nap.edu/catalog.php?record_id=9838

Tobacco Use

According to CDC, smoking harms nearly every organ in the body and it accounts for nearly one of every five deaths each year in the United States.⁸⁹ A higher percentage of Newton County adults smoke cigarettes (22%) than do adults statewide (Figure 21).⁹⁰ This percentage is well-above the Healthy People 2020 target of 12% and puts many Newton County residents at increased risk of illness, worsened quality of life, and premature death. In addition, about one in eleven (8.9%) pregnant women in the county from 2010-2011 smoked cigarettes (see Maternal and Infant Health section), putting infants at increased risk for several health problems including prematurity and low birth weight.

Figure 21. Percent Adults Who Smoke Cigarettes in Newton County and Georgia Compared with Healthy People 2020 Target, 2005-2011



Source: County Health Rankings (<http://www.countyhealthrankings.org/app/home>)

According to the Healthy Communities Institute, tobacco is the agent most responsible for avoidable illnesses and premature death in America today.⁹¹ Tobacco use brings premature death to almost half a million Americans each year, and it contributes to profound disabilities and pain in many others. Approximately one-third of all tobacco users in this country will die prematurely because of their dependence on tobacco.

More detailed data on smoking rates by sex and race/ethnicity are not available for Newton County, but information on smoking rates in the Gwinnett, Newton, and Rockdale County Health District provide some indication. However, it is important to note that Newton County comprises only about one-tenth

⁸⁹ CDC http://www.cdc.gov/tobacco/data_statistics/fact_sheets/health_effects/effects_cig_smoking/index.htm

⁹⁰ County Health Rankings for Newton County, Georgia <http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

⁹¹ Healthy Communities Institute <http://www.gwinnettmedicalcenter.org/community-health-needs-assessments/GMCContentPage.aspx?nd=478>

of the population of the health district. Men in the district were more likely to smoke cigarettes (17%) than women (11%) and White residents were more likely to smoke (16%) than Black residents (14%).⁹²

Tobacco Resources and Prevention Efforts

Given that more than one in five Newton County residents smokes, including about one in eleven pregnant women, interventions to reduce smoking in Newton County are needed at the individual, family, and community levels.

The Georgia Tobacco Quit Line, a statewide public health service is “a free and effective service that helps Georgians quit smoking and using tobacco products.”⁹³ The quit line offers free quitting tips, techniques, and support.

The Guide to Community Preventive Services provides a list of evidence-based interventions to reduce tobacco use and secondhand smoke exposure.⁹⁴ These interventions include measures to increase the price of tobacco products, mobile phone-based cessation interventions, and smoke-free policies.

In December 2012, the Newton County Board of Commissioners passed an ordinance to prohibit tobacco use at county parks and recreation facilities effective April 1, 2013. This ordinance was intended to “lessen exposure to secondhand smoke, reduce litter in park grounds, and discourage youth from smoking or using smokeless tobacco products by helping to change community norms and establishing positive role models for youth.”⁹⁵ The Health Department provided signs for all parks and information on best practices for implementing tobacco-free environments. The Newton County Board of Education also prohibits employee use of tobacco on school system property.⁹⁶

Effective April 1, 2013: ALL Newton County Recreation Facilities/Parks will be TOBACCO FREE

Source: Newton County Recreation

Physical Activity

⁹² OASIS Web Query Tool <http://oasis.state.ga.us/oasis/brfss/qryBRFSS.aspx>

⁹³ Georgia Tobacco Quit Line <http://dph.georgia.gov/georgia-tobacco-quit-line> (1-877-270-STOP)

⁹⁴ Guide to Community Preventive Services <http://www.thecommunityguide.org/Tobacco/index.html>

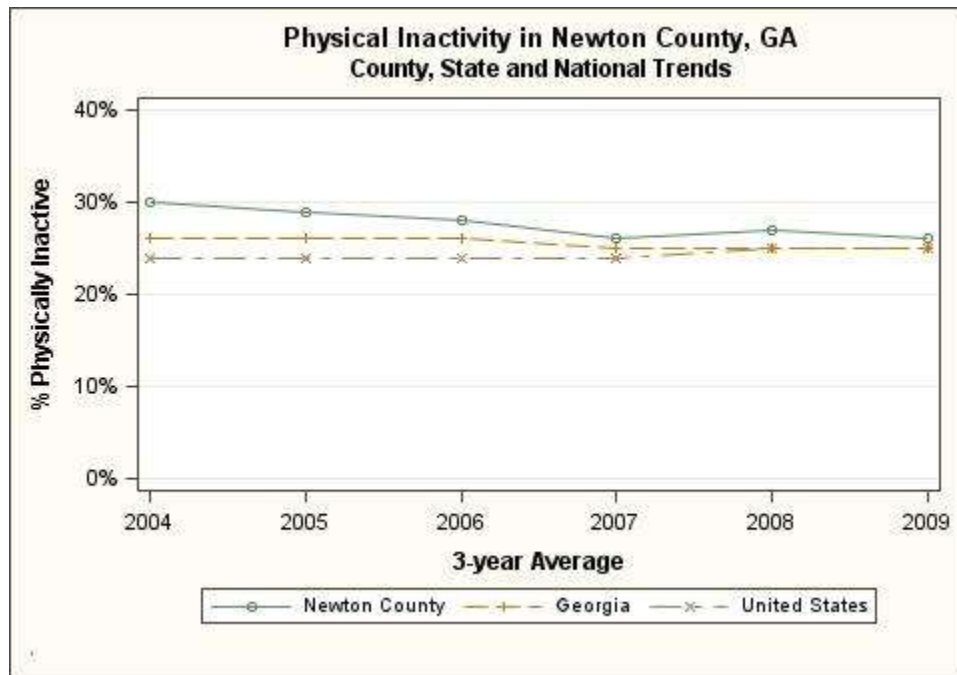
⁹⁵ Newton County Tobacco-Free Parks Ordinance <http://co.newton.ga.us/dmdocuments/Ordinances/2012/O-120412 - Tobacco Free Parks & Recreational Facilities.pdf>

⁹⁶ Newton County Board of Education Policy http://www.newtoncountyschools.org/Portals/0/NewtonCounty/Main/Documents/BOE_Documents/Policies/SectionG/Policy%20GAN.pdf

An estimated 26% of Newton residents get no leisure-time physical activity compared with a state average of 24%. This percentage has decreased slightly in recent years (Figure 22). Lack of physical activity is a major risk factor for premature death and can contribute to an unhealthy body weight.

Resources to improve physical activity are discussed further in the Transportation and Land Use section and the Chronic Diseases section.

Figure 22. Physical Inactivity in Newton County, Georgia, 2004-2009



Source: County Health Rankings

<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

Excessive Drinking and Drug Abuse

According to the Guide to Community Preventive Services, excessive alcohol consumption is the third leading cause of preventable death in the United States. In 2006, the estimated economic cost of excessive drinking in the U.S. was nearly a quarter of a trillion dollars.⁹⁷

An estimated 12% of Newton residents drank alcohol excessively during the time period 2005-2011 compared with a statewide average of 14%.⁹⁸ According to the Community Guide, evidence-based interventions that can further reduce the level of excessive drinking include increasing alcohol taxes, maintaining limits on the days and hours of alcohol sales, and enhanced enforcement of laws prohibiting alcohol sales to minors.

⁹⁷ Guide to Community Preventive Services <http://www.thecommunityguide.org/alcohol/index.html>

⁹⁸ County Health Rankings for Newton County, Georgia
<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

Data are not available specific to Newton County, but prescription drug abuse is a growing epidemic in the United States. Nationwide, deaths from prescription painkiller overdoses have increased 265% among men and 400% among women from 1999 to 2013.⁹⁹ Every 3 minutes, a woman goes to the emergency department for prescription painkiller misuse or abuse.

Adolescent Health Behaviors

According to the Youth Risk Behavioral Survey, rates of substance abuse were lower among Newton County high school students than statewide and national rates (Figure 23). The percentages of Newton County high school students who reported binge drinking, tobacco use, marijuana use, and methamphetamine use were 25-60% lower than students statewide.

Importantly, however, community members were concerned about the level of after-school supervision and the lack of activities, which some thought led to high rates of drug use. Some thought that drug use was underreported. Another community member was concerned that alcohol and drug treatment was not available for children and teens in the county.

**Figure 23. Drug and Substance Abuse Behaviors Among Adolescents in Newton County, Georgia, and the U.S., 2011
(used or participated in a substance abuse behaviors in the past 30 days)**

⁹⁹ CDC <http://www.cdc.gov/vitalsigns/PrescriptionPainkillerOverdoses/>

| | Newton County Schools (grades 6-12) 2011-2012 | Newton County High Schools (3 total) 2011-2012 | Georgia High Schools 2011 | U.S. High Schools 2011 |
|----------------------|---|--|---------------------------|------------------------|
| Binge Drinking | 6.6% | 10.7% | 17.5% | 21.9% |
| Drinking and Driving | 1.7% | 2.7% | 6.7% | 8.2% |
| Tobacco Use | 9.1% | 14.0% | 22.7% | 23.4% |
| Cigarette Use | 8.5% | 12.1% | 16.9% | 18.1% |
| Marijuana Use | 11.6% | 16.0% | 21.2% | 23.1% |
| Meth Use | .72% | 1.6% | 6% | 3.8% |

Data Source: Centers for Disease Control and Prevention. 2011 Georgia Youth Risk Behavior Survey (YRBS). Available at: www.cdc.gov/yrbs, Georgia Department of Education. Georgia Student Health Survey.

Reproduced from Newton Medical Center Community Health Needs Assessment
<http://www.newtonmedical.com/pdf/Newton%20Final%20Report2013.pdf>

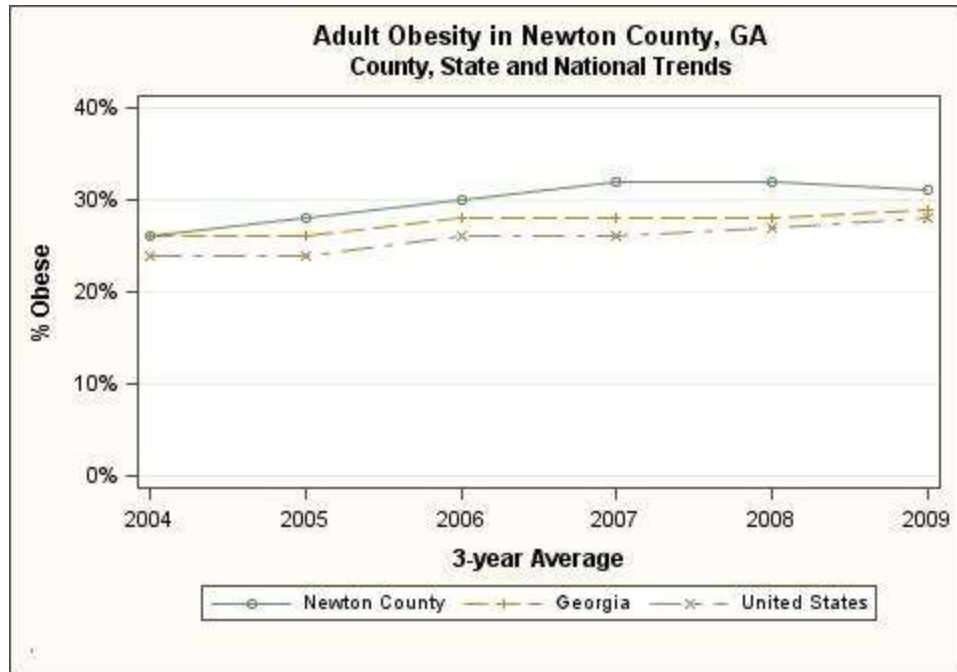
Chronic Diseases

Newton County faces a growing burden of chronic disease. As noted in the Background section, interventions to foster healthy behaviors, prevent chronic disease, and treat these diseases in their early stages have a huge potential impact on health.

Adult Obesity

An estimated 31% of Newton County adults are obese (defined as a body mass index [BMI] of 30 or higher) compared with a statewide percentage of 28% (Figure 24). This level of obesity puts nearly one-third of adult residents at higher risk for serious conditions like diabetes, heart disease, cancer, osteoarthritis, respiratory problems, and stroke. It is important to note that this degree of obesity is a relatively new for both Newton County and Georgia. For instance, back in 1990, Georgia's obesity rate was only 10%. Obesity carries significant economic costs to the community due to increased health care spending (\$1,429 per person compared with those of normal weight) and lost earnings.

Figure 24. Adult Obesity in Newton County, Georgia, 2004-2009



Source: County Health Rankings

<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

Obesity data for Newton County are not available grouped by sex or race and ethnicity. However, data are available for the public health district that includes Gwinnett, Newton, and Rockdale counties from 2011. Newton County makes up about one-tenth of the district's population. In this district, men and women had a similar rate of obesity (23% vs. 24%, respectively), and 22% of White residents were obese compared with 33% of Black residents; data were not available for other race/ethnic groups.¹⁰⁰ By comparison, national data show that non-Hispanic Black residents had the highest age-adjusted rates of obesity (50%) compared with Hispanic residents (39%), and non-Hispanic White residents (34%).

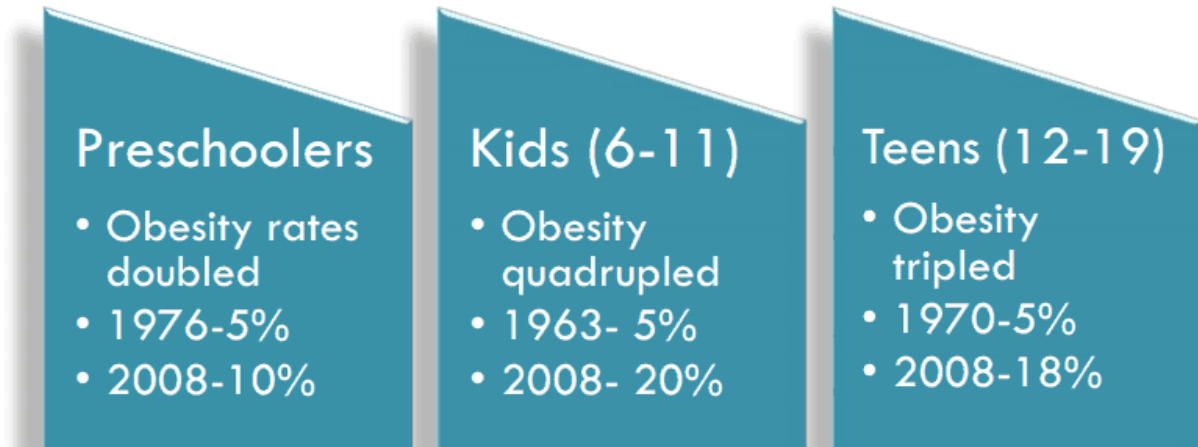
From 2009-2011, an estimated one in eight (12%) Newton low-income children in preschool (ages 2-4) were obese compared with a nationwide county average of 14%.¹⁰¹ Obesity this early in life carries both immediate and potentially severe long-term risks. Nationwide, childhood obesity has increased dramatically in recent decades (Figure 25), raising concern that many of today's children might live shorter lives than their parents. In Georgia, obesity-related hospitalizations of children cost \$2.1 million a year and continue to rise.

Figure 25. Rising Obesity Rates in the United States

¹⁰⁰ Georgia Online Analytical Statistical Information System

<http://oasis.state.ga.us/oasis/oasis/brfss/qryBRFSS.aspx>

¹⁰¹ U.S. Department of Agriculture Economic Research Service <http://www.ers.usda.gov/data-products/food-environment-atlas/go-to-the-atlas.aspx#.Um68NnC-qtE>



Graphic Source: Newton Partnership—Children’s Issues in Newton Report 2013

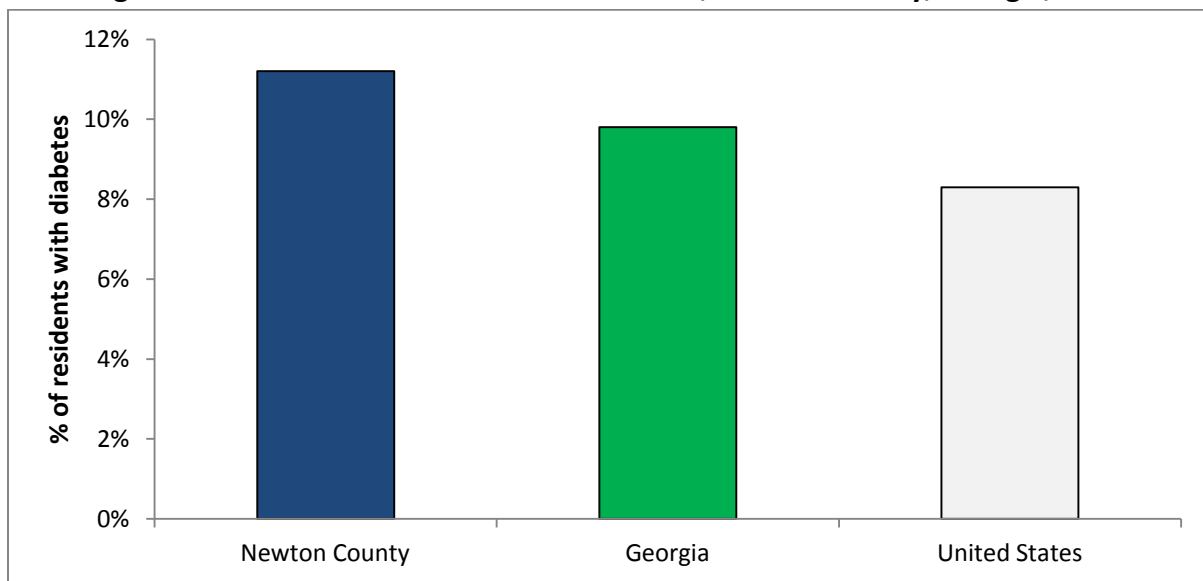
<https://docs.google.com/file/d/0B3SuY1V9SSTUSFFLNDZKVjRIM1E/edit>

Data Source: GA SHAPE & COC/NCHS National Examination Surveys

Diabetes

Diabetes affects nearly all of the body’s organ systems and can lead disability and early death. In 2010, an estimated 11% of Newton adults (7,600 residents) had diabetes, which was higher than the Georgia estimate of 10% (Figure 26).¹⁰² Diabetes is part of the growing chronic disease trend. From 1996 to 2010, the percent of Georgians with diabetes has more than doubled from 4% to 10% and the number of people with the disease has more than tripled.¹⁰³ In Newton County, from 2004 to 2010, the number of diabetic residents grew by 68% (Figure 27).

Figure 26. Percent of Residents with Diabetes, Newton County, Georgia, 2010

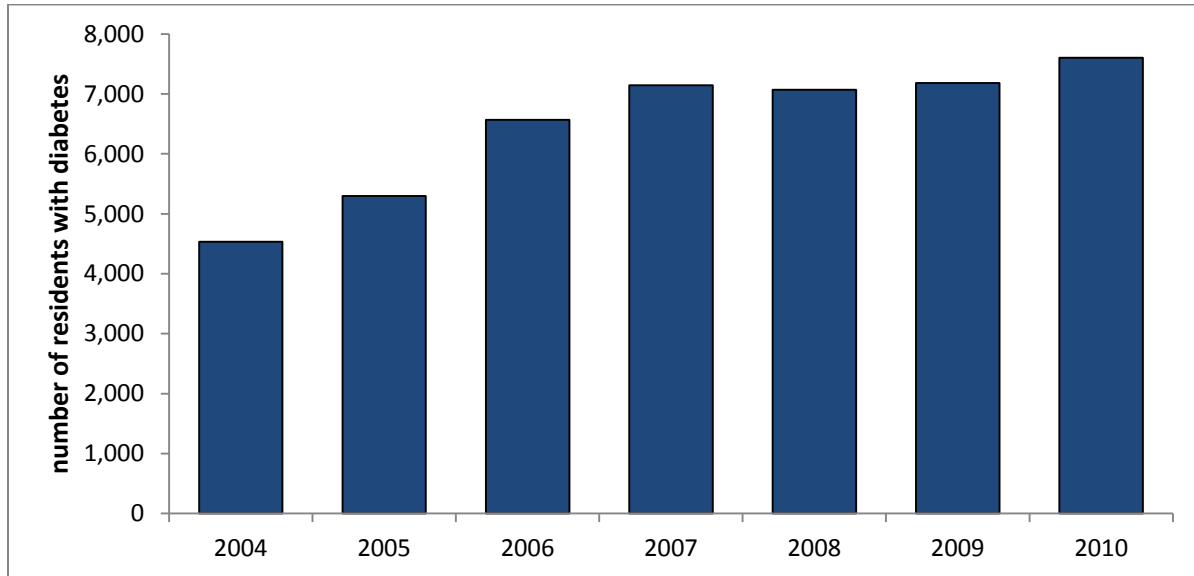


¹⁰² CDC <http://www.cdc.gov/diabetes/atlas/>

¹⁰³ CDC <http://www.cdc.gov/diabetes/atlas/>

Source: CDC <http://www.cdc.gov/diabetes/atlas/>

Figure 27. Total Number of Adults (age 18 years and older) with Diagnosed Diabetes, Newton County, Georgia, 1994-2010



Source: CDC <http://www.cdc.gov/diabetes/atlas/>

Eating habits and physical activity play a major role in most cases of diabetes. The age-adjusted death rate from 2009-2011 due to diabetes in Newton County was 21.4 per 100,000 population compared with a statewide average of 23.8 per 100,000. Men died from diabetes at nearly three times the rate of women (32.2 per 100,000 vs. 13.6 per 100,000). African-Americans a higher age-adjusted death rate from diabetes (29.5 per 100,000) compared with non-Hispanic White residents (18.0 per 100,000). These data suggest that diabetes prevention, through environmental changes that promote physical activity and better eating habits, and early treatment are needed.

Why Age-Adjusted?

Death rates due to many diseases are adjusted for age to make it possible to compare counties or population groups. For example, two counties might have the same death rate due to diabetes after age is taken into account. But if age had not been adjusted for, the county with the older population would likely have a higher death rate because older people are more likely to die from diabetes.

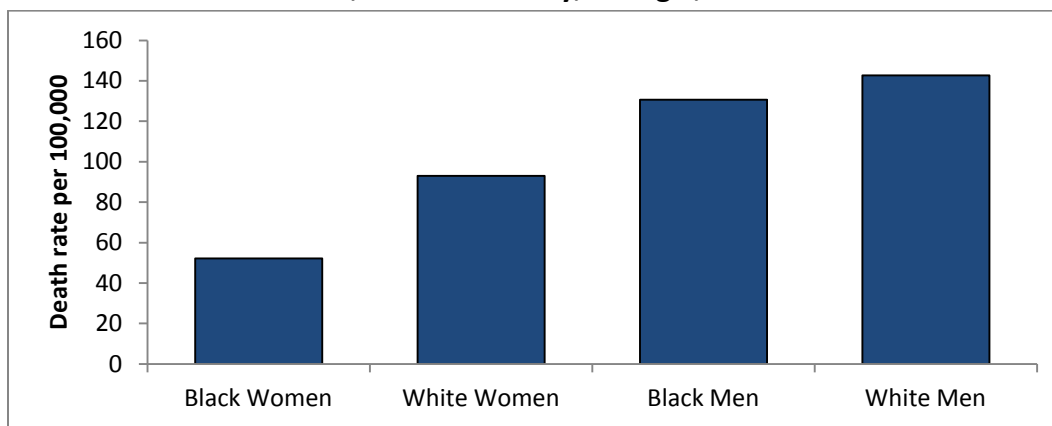
Cardiovascular Disease and Stroke

Cardiovascular disease and stroke caused nearly one-third of the deaths in Newton County from 2007-2011. These diseases are strongly related to obesity, diabetes, high blood pressure, and tobacco use. Although Newton’s age-adjusted rates of heart disease and stroke are below the statewide average,

they remain important health threats in the county, just as they are nationwide. Smoking, lack of physical activity, poor diet, high cholesterol, diabetes, and high blood pressure are all risk factors for heart disease and stroke.

The age-adjusted death rate due to “obstructive” heart disease (which includes heart attacks) in Newton was 102.3 per 100,000 from 2009-2011, which was higher than the statewide rate of 87.1 per 100,000. Women had lower rates than men and Non-Hispanic Black residents had lower rates than non-Hispanic White residents of the same gender (Figure 28; data were insufficient to calculate rates for Hispanic residents).

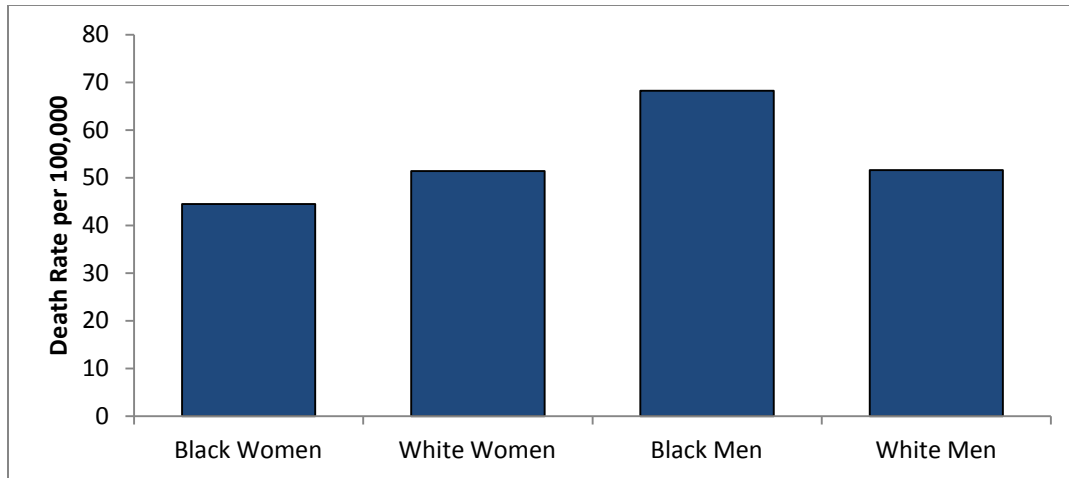
Figure 28. Age-Adjusted Death Rate Due to “Obstructive” Heart Disease among Non-Hispanic Residents, Newton County, Georgia, 2009-2011



Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Strokes, sometimes referred to as “brain attacks,” are one of the leading causes of death in the United States. The age-adjusted death rate due to stroke in Newton County from 2009-2011 was 53.8 per 100,000, which was higher than the Georgia rate of 44.5 per 100,000. Black men had a higher rate than White men and both Black and White women (Figure 29).

Figure 29. Age-Adjusted Death Rate Due to Stroke Among Non-Hispanic Residents, Newton County, 2009-2011



Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Emphysema and Chronic Bronchitis

Emphysema and chronic bronchitis are the third leading cause of disability and death in the United States. Tobacco smoke is a key factor in the development and progression of these diseases. The age-adjusted death rate from emphysema and chronic bronchitis from 2007-2011 in Newton County was 54.9 per 100,000, which was higher than the Georgia rate of 44.5 per 100,000.¹⁰⁴ This higher rate in Newton County is likely explained in part by the higher rate of smoking Newton County noted earlier. Avoiding tobacco smoke is the key way to prevent both emphysema and chronic bronchitis.

Chronic Disease Resources

The three most important behavioral factors in preventing the chronic diseases presented above are (1) smoking cessation, (2) good nutrition, and (3) increased physical activity. These behavioral factors also influence blood pressure, blood sugar levels, and cholesterol, which also affect chronic diseases. Tobacco resources are described in the Tobacco section.

Improving nutrition and physical activity also require a coordinated community effort. Education is a key part of the equation, but needs to be part of a larger effort. Changes in the built environment—like sidewalks and developments that encourage walking to schools—and the food environment—like increasing access to healthy foods—are promising strategies for helping all residents attain a healthy body weight. Newton County organizations and government are working to make these changes happen.

Several other resources are available to help resident's attain a healthy body weight and prevent chronic diseases. The Newton Partnership has begun a Childhood Obesity Prevention Initiative in collaboration with the health department.¹⁰⁵ The Georgia SHAPE program works to reduce childhood obesity by

¹⁰⁴ OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

¹⁰⁵ Georgia Family Connection Partnership http://www.gafcp.org/communicate/tmp_stories/cohorts

partnering with schools and other community organizations.¹⁰⁶ Newton County’s Theme School at Ficquett recently received a Georgia Department of Public Health grant to implement Georgia SHAPE activities. The Newton County School System received a Physical Education Program grant to increase physical activity in schools.¹⁰⁷

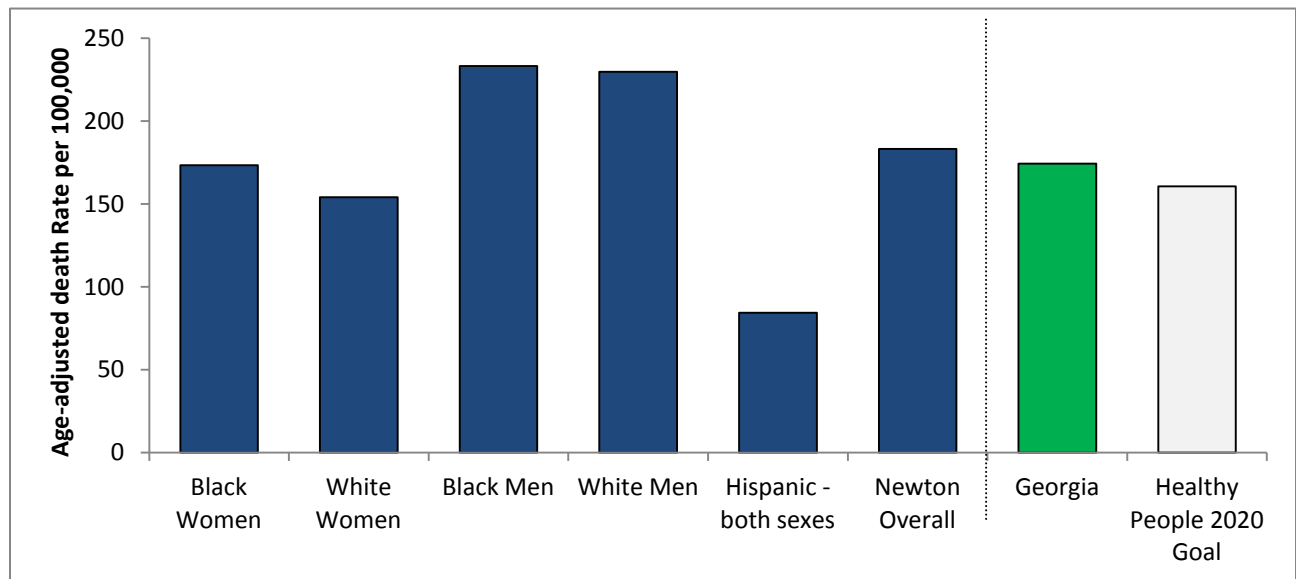
The Covington Family YMCA is a key player in increasing physical activity.¹⁰⁸ Health care providers and organizations also have important roles to play in controlling obesity-related chronic diseases. The Newton Partnership has also begun work on obesity-related initiatives.

Cancer

Cancer caused more than one in five deaths in Newton County from 2007-2011 and rates of cancer in the county were higher than statewide rates.

The overall age-adjusted death rate due to cancer in Newton County was 183 deaths per 100,000 population from 2007-2011, which was above the Georgia average of 174 per 100,000 and the Healthy People 2020 target of 161 per 100,000. Men had substantially higher rates than women and non-Hispanic Black residents had a higher rate than non-Hispanic Whites (Figure 30). Hispanic residents had a substantially lower age-adjusted death rate than non-Hispanic residents.

Figure 30. Age-Adjusted Death Rate Due to Cancer by Race/Ethnicity and Sex, Newton County, 2007-2011



¹⁰⁶ Georgia SHAPE <http://www.georgiashape.org/>

¹⁰⁷ Newton Citizen. “Schools receive physical education grant.” August 14, 2012.

<http://www.newtoncitizen.com/news/2012/aug/13/schools-receive-physical-education-grant/>

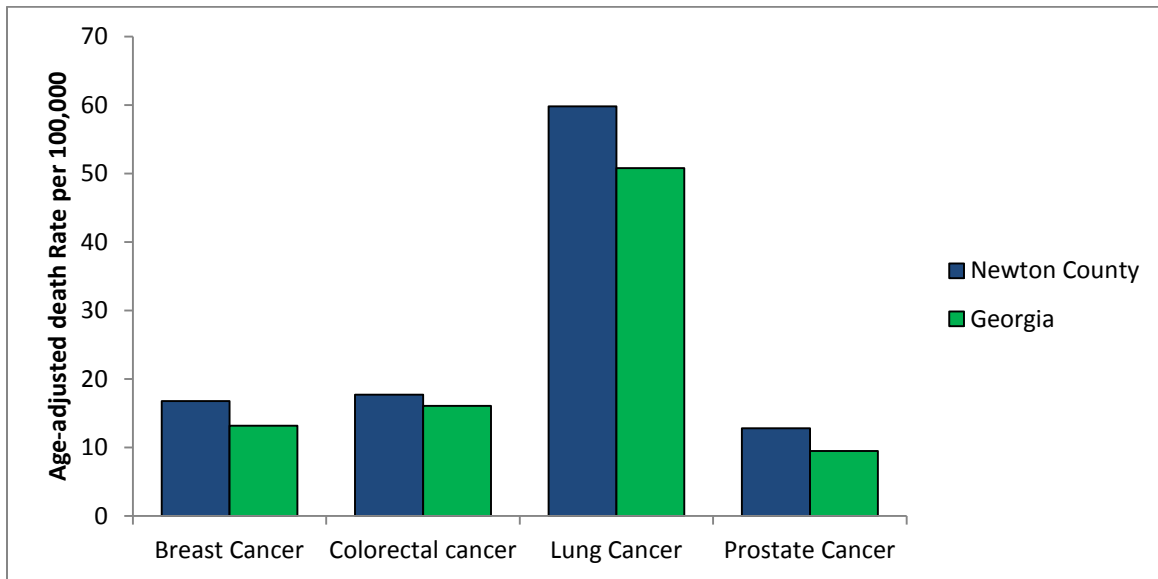
¹⁰⁸ Covington Family YMCA <http://www.ymcaatlanta.org/locations/facility/branches/cvy/branchhome.shtml>

Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

White and Black categories include only non-Hispanic residents; insufficient data were available to report Hispanic rates by sex

Breast cancer, colorectal cancer, lung cancer, and prostate cancer are the four most common types of cancer in Newton County and nationwide. Newton County age-adjusted death rates due to each of these four cancers exceeded the statewide rate (Figure 31) and Healthy People 2020 targets.

Figure 31. Age-Adjusted Death Rate Due to Four Most Common Cancers in Newton County and Georgia, 2007-2011



Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Cancer prevention was identified as a priority by Newton County residents. Some of the most important way to prevent cancer are tobacco cessation, maintaining a healthy body weight, and physical activity. Evidence-based screenings like pap smears for cervical cancer and mammograms for breast cancer are also important. Quality clinical care for those with cancer is also critical.

Teen Pregnancy

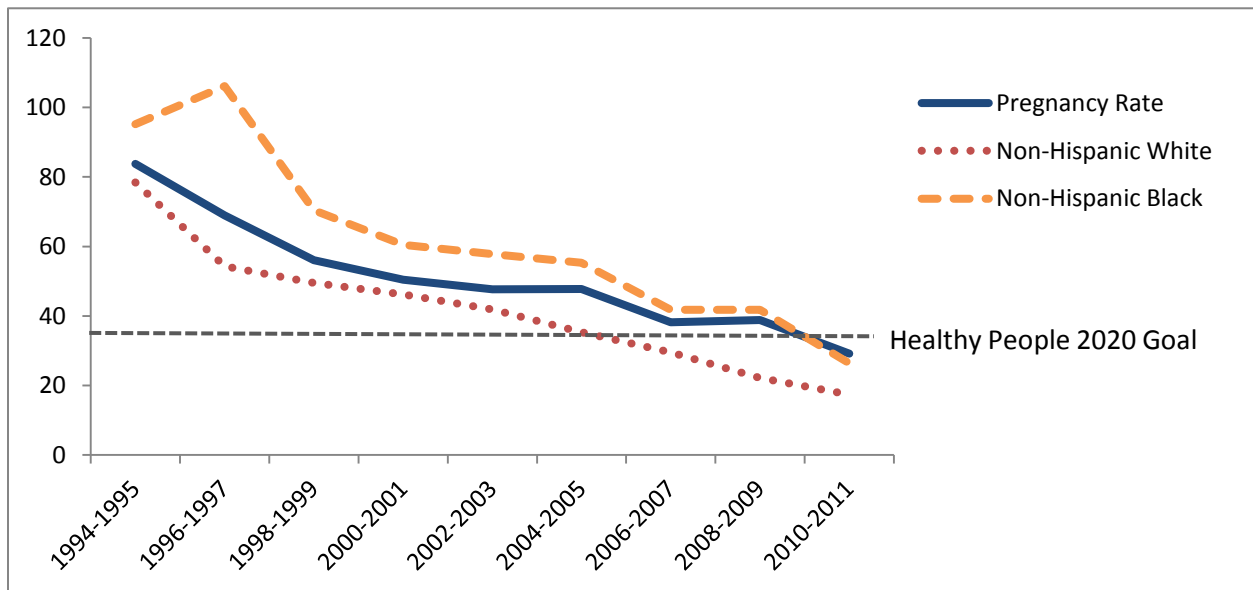
According to the Healthy Communities Institute, teen pregnancy and childbearing have substantial social and economic impacts for communities, contributing to high school dropout and increased health care and foster care costs. In 2011, the teen pregnancy rate in Newton County was 28.8 per 1,000 girls age 15-17, which was slightly higher than the Georgia statewide rate of 25.3 per 1,000, but well below the Healthy People 2020 target of 36.2 per 1,000.¹⁰⁹ In 2000, the rate was nearly twice as high. Teen

¹⁰⁹ OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

pregnancy rates have declined substantially for both Black and White girls over the past 15 years, but could still be reduced further (Figure 32).¹¹⁰

Too few data were available to calculate teen pregnancy rates for Hispanic girls before 2008, but pregnancy rates for Hispanic girls 15–17 years old were 33.8 per 1,000 in 2008–2009 and 64.7 per 1,000 in 2010-2011. Thus, for 2010-2011, the teen birth rate among Hispanic girls was over twice as high as the rate for all teens and was over three times the rate for non-Hispanic White girls.

Figure 32. Teen Pregnancy Rate (per 1,000 girls age 15-17) for Newton County Residents, 1994-2011



Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

The Newton County Medical Center CHNA lists the Refuge Pregnancy Center (<http://www.refugepregnancycenter.com/>) in Conyers, GA as a teen parenting resource.

Maternal and Infant Health

Of the 1,355 births to Newton County mothers in 2011, 12.5% of infants were born premature or preterm (defined as birth before the end of the 37th week of pregnancy). This percentage was slightly higher than the statewide average of 11.6%. Preterm birth is a leading cause of infant death and disability and can be influenced by smoking, alcohol use, stress, and lack of prenatal care and vitamins. Girls 15-17 years old and women in their 40s had the highest rates of preterm delivery.

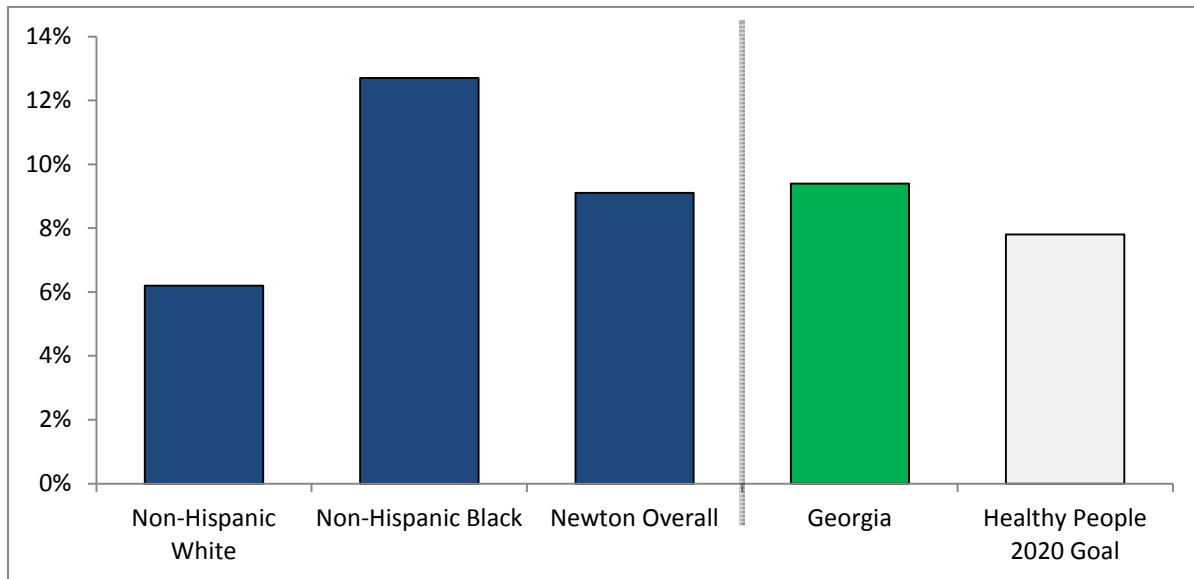
Low birth weight is closely related to preterm birth, but may be caused by other factors. About 9.1% of babies born in Newton County in 2011 had low birth weight (less than 5 pounds, 8 ounces), which was

¹¹⁰ OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

about the same as the statewide average of 9.4%, but higher than the Healthy People 2020 target of 7.8%. Low birth weight was most common among girls age 15-17 years and women over 40 years, as well as African-American women (Figure 33).

Figure. Percent of Infants Born with Low Birth Weight by Race, Newton County, 2011

Figure 33. Percent of Newborns with Low Birth Weight born to Newton County Mothers, 2011



Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

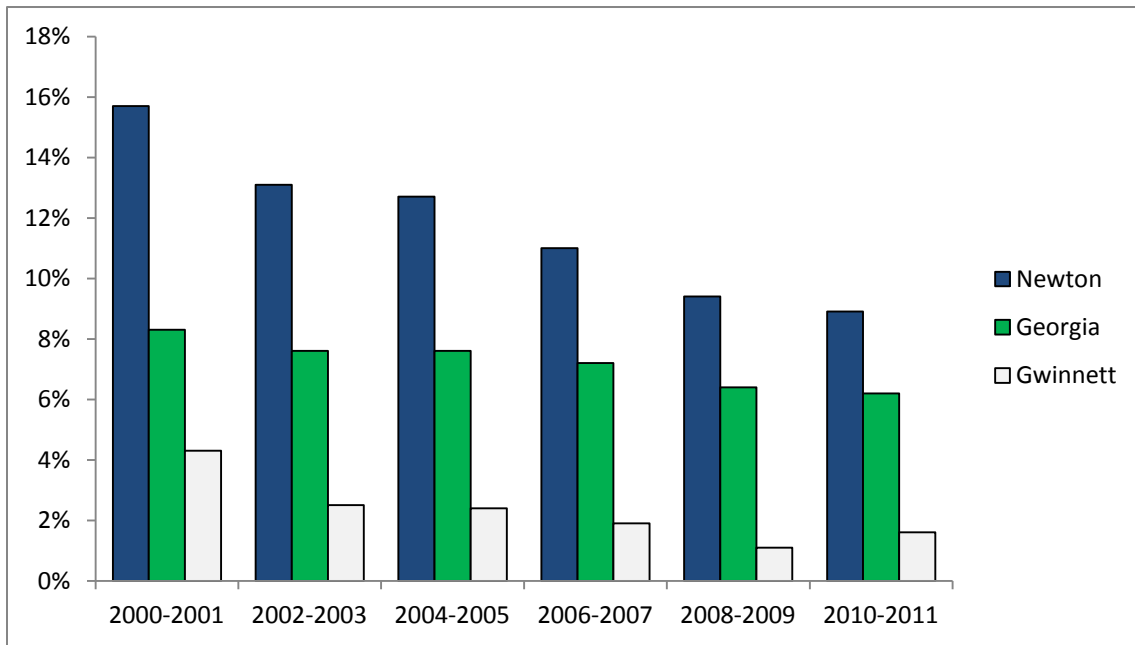
Babies born at very low birth weight (less than 3 pounds, 5 ounces) are at high risk of complications like infection, sudden infant death syndrome (SIDS), breathing problems, and bleeding inside the brain. About 1.5% of babies born in Newton County in 2011 had very low birth weight. This percentage was lower than the state average of 1.8% and was nearly as low as the Healthy People 2020 target of 1.4%. The rate among African-American women was 2.3%. Risk factors for very low birth weight are similar to those for low birth weight.

Mothers who Smoked During Pregnancy

Smoking during pregnancy poses significant risks to both the mother and the fetus, including an increased risk for preterm birth and low birth weight. From 2009-2011, 8.8% of pregnant women in Newton County smoked (Figure 34).¹¹¹ This percentage was higher than the statewide percentage of 6.3% and more than six times the percentage in nearby Gwinnett County (1.4%). Smoking during pregnancy was most common among non-Hispanic White women (15.2%) and women 20-24 years (11.8%) (Figures 35 and 36).

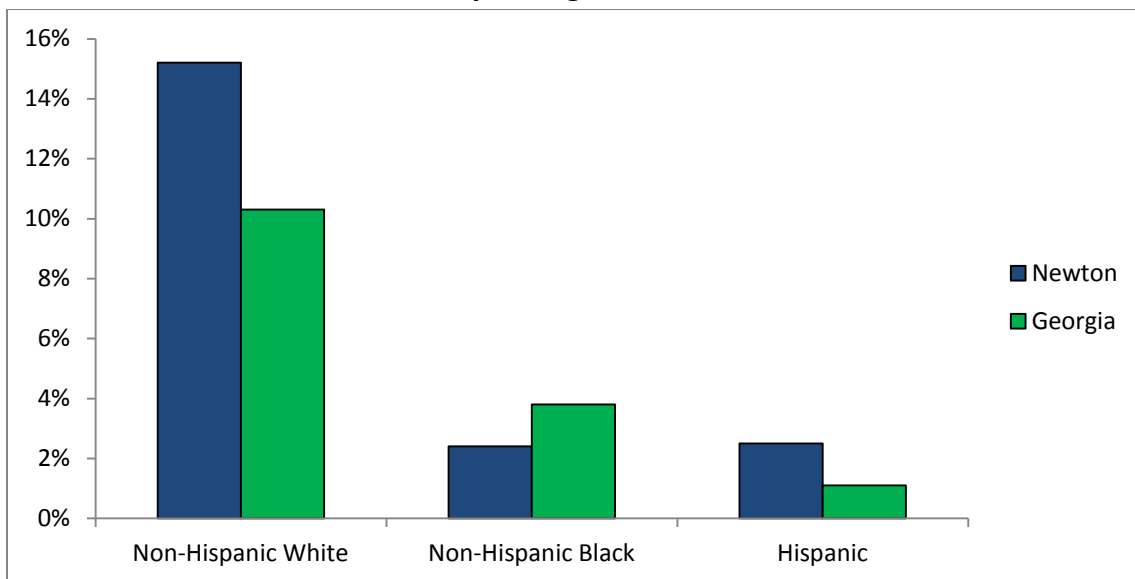
¹¹¹ OASIS <http://oasis.state.ga.us/oasis/oasis/qryMCH.aspx>

Figure 34. Percentage of Mothers Who Smoked During Pregnancy, Newton County, Gwinnett County, and Georgia, 2000-2011



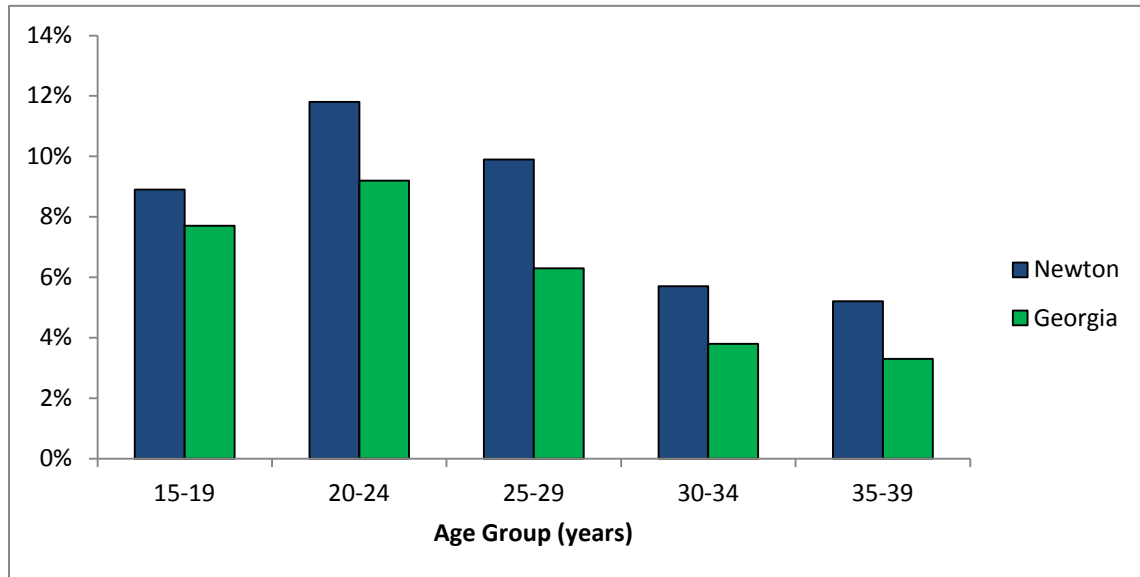
Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Figure 35. Percentage of Mothers Who Smoked During Pregnancy by Race/Ethnicity, Newton County, Georgia, 2009-2011



Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Figure 36. Percentage of Mothers Who Smoked During Pregnancy by Age Group, Newton County, Georgia, 2009-2011



Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Infectious Diseases

Infectious diseases, including influenza, pneumonia, tuberculosis, HIV, hepatitis, and sexually transmitted infections, remain a threat to Newton County’s health. Ongoing vigilance is critical in our increasingly interconnected world. Infectious diseases do not respect national—or county—borders.

According to the National Foundation for Infectious Disease, each year, on average, in the U.S. more than 50,000 adults die from vaccine-preventable diseases. A number of diseases and infections are easily prevented in both children and adults through adequate immunizations including diphtheria*, *Haemphilus influenzae* type B* (Hib), hepatitis A, hepatitis B*, measles*, mumps*, pertussis* (whooping cough), polio*, rubella* (German measles), *Streptococcus pneumonia*, tetanus* (lockjaw) and varicella* (chickenpox). Georgia law requires vaccination for the diseases marked with an asterisk (*) for children who attend daycare and prior to entry into school.

Influenza and Pneumonia

Influenza and pneumonia rank eighth among the leading causes of death in the United States, and vaccines for influenza and pneumonia can help prevent serious illness and death. In Newton County, the 2009-2011 age-adjusted death rate due to influenza and pneumonia was 15.8 per 100,000 population. By comparison, the statewide rate was 18.1 per 100,000, but the rate in nearby Gwinnett County was 9.4 per 100,000.

HIV/AIDS

HIV/AIDS affects people in Newton County. In 2010, there were 137 people living with HIV in Newton County, which yielded a prevalence of 172 per 100,000 residents. This figure was lower than the statewide prevalence of 429 per 100,000.¹¹² Of the 137 people living with HIV/AIDS in the county in 2010, 71% were Black, 21% were White, and 4% were Hispanic; 72% were male. A majority of these residents were age 45 years or older; 8% were 13-24 years, 15% were 25-34 years, 27% were 35-44 years, 34% were 45-54 years, and 16% were age 55 years or older. From 2008 to 2011, 44 Newton County residents were diagnosed with HIV.

Hepatitis

Hepatitis is a viral disease that causes inflammation of the liver. Transmission and/or treatment differ depending on which virus causes the illness. There are five possible viruses named hepatitis: A, B, C, D and E viruses. Other viruses may cause hepatitis but are very rare. In Georgia, hepatitis A, B and C are reportable diseases; hepatitis D is not reportable as it only occurs among individuals already infected with hepatitis B; hepatitis E is not monitored as it is not found in the U.S. Vaccines are available for both hepatitis A and B; however, no vaccine is available for hepatitis C.

Each type of hepatitis can be spread in different ways. Hepatitis A virus is spread from person to person by putting something in the mouth that has been contaminated with the stool of a person with hepatitis A. Casual contact, as in the usual office, factory or school settings, does not spread the virus. Hepatitis B virus is spread when blood from an infected person enters the body of a person who is not infected. For example, hepatitis B is spread through having unprotected sex with an infected person, by sharing drugs, needles or other paraphernalia, through needle sticks or sharps exposures on the job, or from mother to her baby during birth. Hepatitis C virus is also spread when blood from an infected person enters the body of a person who is not infected; however, it is rare for hepatitis C to be spread through unprotected sexual activities.

¹¹²AIDSVu www.aidsvu.org

Perinatal Hepatitis B

According to CDC, Hepatitis B virus (HBV) infection in a pregnant woman poses a serious risk to her infant at birth.¹¹³ Without appropriate treatment, about 40% of infants born to HBV-infected mothers in the United States will develop chronic HBV infection, about one-fourth of whom will eventually die from chronic liver disease.

Sexually Transmitted Diseases

Georgia's rates of sexually transmitted diseases (STDs) like chlamydia, gonorrhea, and syphilis, are among the highest in the country (Table 1).

Table 1. States with the Highest Rate of Sexually Transmitted Diseases, United States, 2010

| Rank | Primary and Secondary Syphilis | Chlamydia | Gonorrhea |
|-------|--------------------------------|------------------------|------------------------|
| 1 | Louisiana (12.2) | Alaska (861.7) | Mississippi (209.9) |
| 2 | Georgia (8.1) | Mississippi (725.5) | Louisiana (198.4) |
| 3 | Mississippi (7.7) | Louisiana (648.9) | Alaska (182.3) |
| 4 | Arkansas (7.1) | New Mexico (582.5) | South Carolina (174.7) |
| 5 | Illinois (7.0) | South Carolina (581.5) | Alabama (168.5) |
| 6 | Florida (6.4) | Alabama (574.3) | Arkansas (165) |
| 7 | Maryland (5.8) | Arkansas (533.8) | Georgia (161.3) |
| 8 | New York (5.6) | New York (511.3) | North Carolina (150.4) |
| 9 | California (5.6) | Delaware (504.3) | Ohio (142.9) |
| 10 | Alabama (5.5) | Michigan (496.3) | Michigan (136.7) |
| ...15 | | Georgia (459.3) | |

Data Source: Centers for Disease Control and Prevention (2011, November) *Sexually Transmitted Disease Surveillance, 2010, Tables 2, 13 and 25,*

Reproduced from Newton Medical Center Community Health Needs Assessment

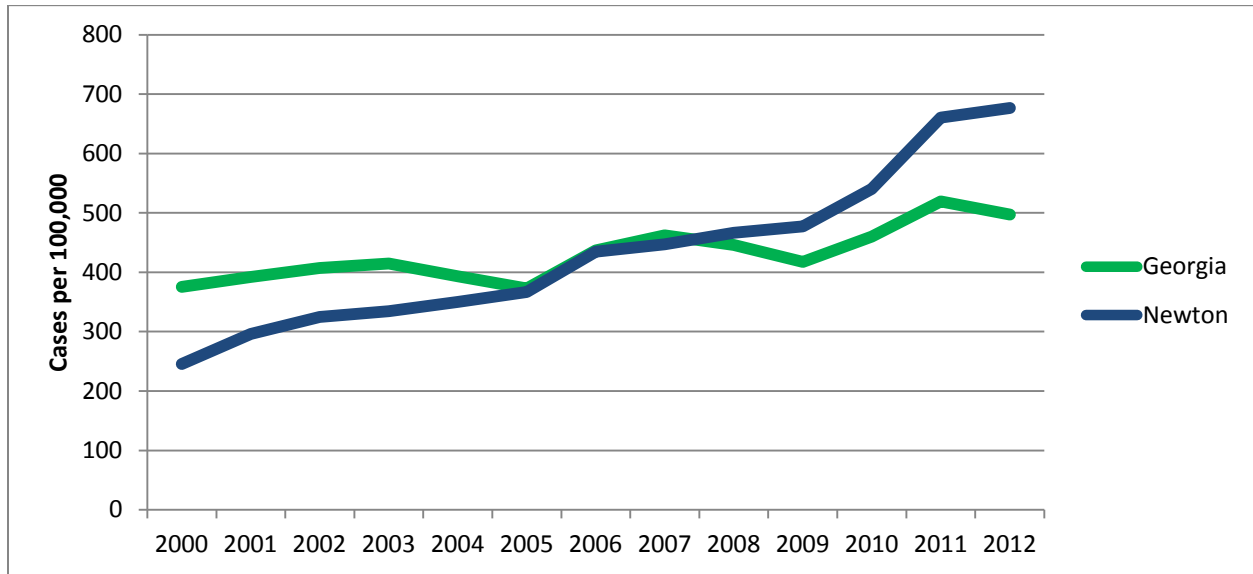
<http://www.newtonmedical.com/pdf/Newton%20Final%20Report2013.pdf>

Chlamydia

¹¹³ CDC <http://www.cdc.gov/hepatitis/HBV/PerinatalXmntn.htm>

Like elsewhere in Georgia, sexually transmitted diseases (STDs) are a health problem in Newton County. In 2012, there were 677 cases of chlamydia per 100,000 population, representing a more than 40% increase from 2009, when the rate was 477 per 100,000 (Figure 37).¹¹⁴ The statewide rate was 497 per 100,000 in 2012. The incidence in Newton County was highest among non-Hispanic Black residents and women (Figures 38 and 39). Georgia was estimated to have the 7th highest rate of chlamydia in the country in 2011.¹¹⁵

Figure 37. Chlamydia Cases per 100,000 in Newton County and Georgia, 2000-2012

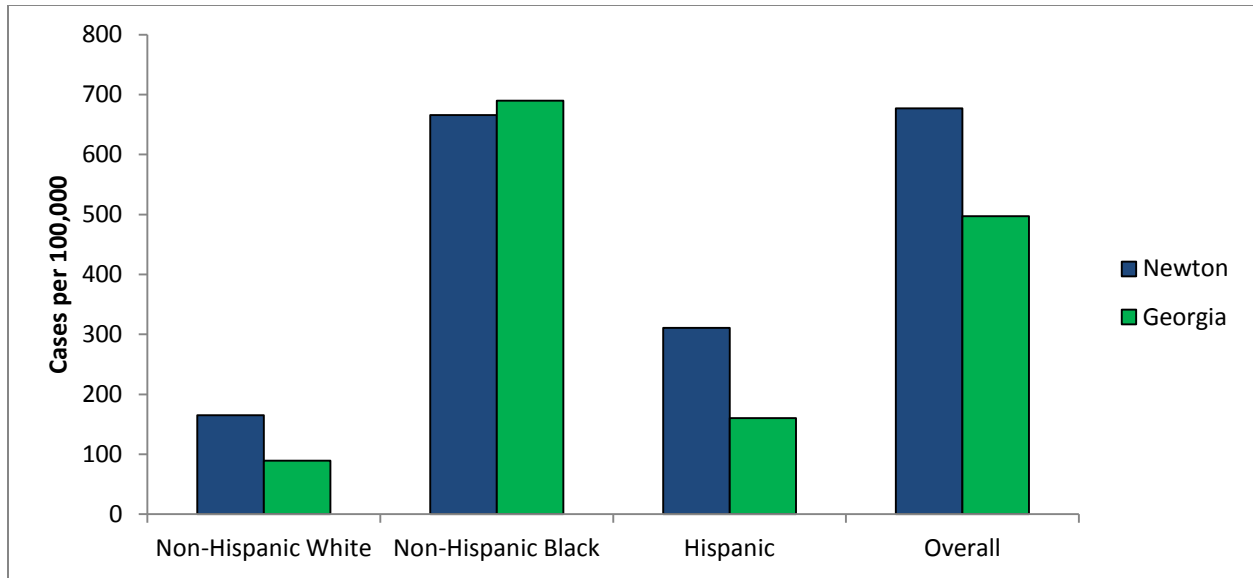


Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Figure 38. Chlamydia Cases per 100,000 by Race/Ethnicity in Newton County and Georgia, 2011

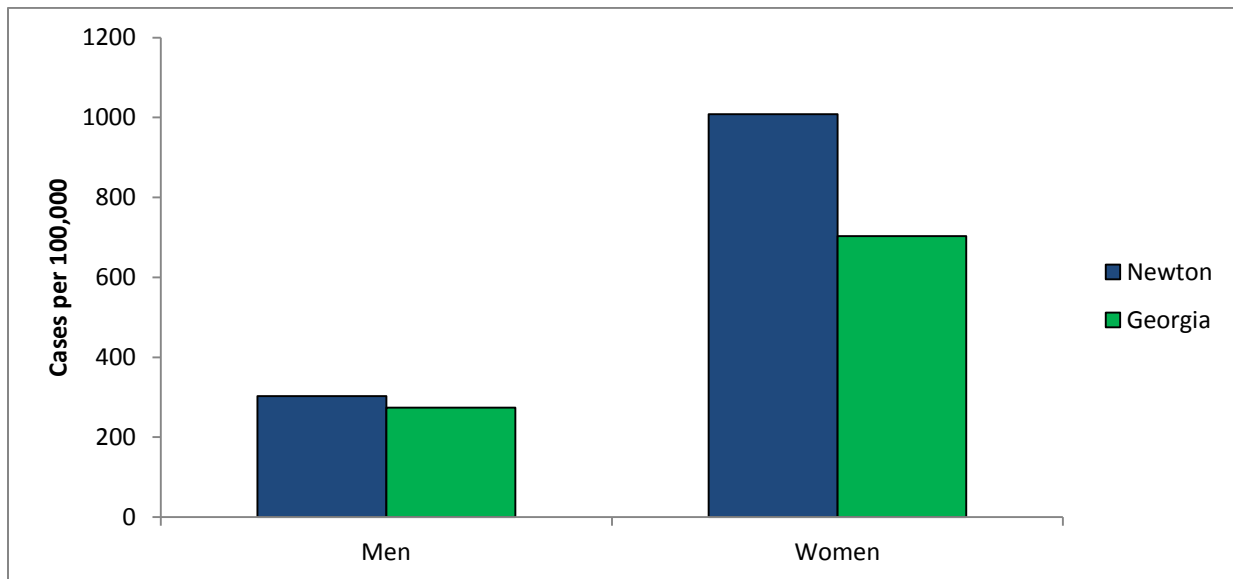
¹¹⁴ OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

¹¹⁵ CDC <http://www.cdc.gov/std/chlamydia/stats.htm>



Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Figure 39. Chlamydia Cases per 100,000 by Sex in Newton County and Georgia, 2011



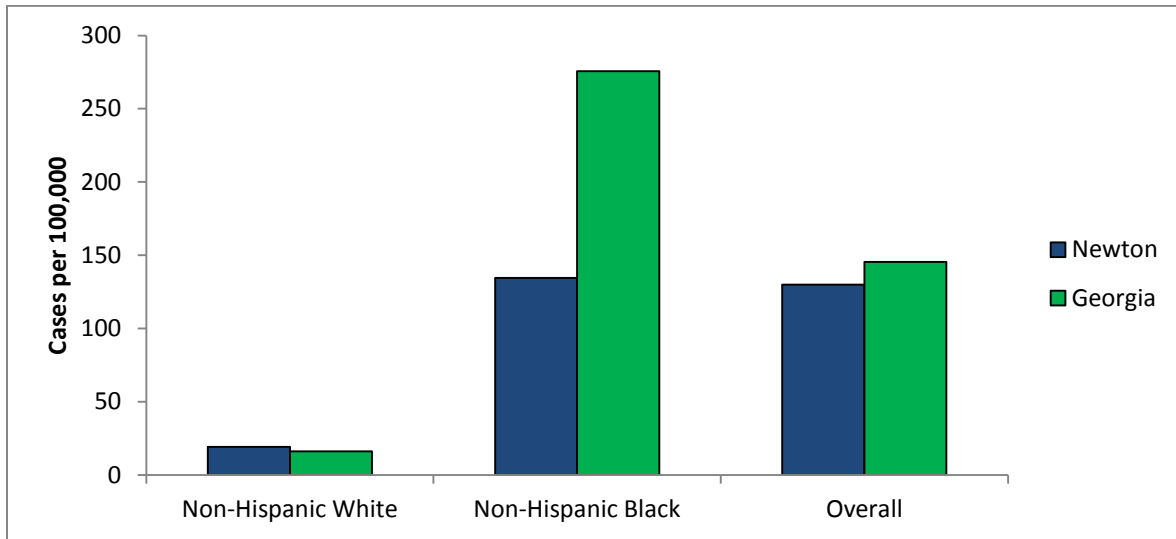
Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Gonorrhea

Like chlamydia, gonorrhea can cause serious and permanent health problems in women and men. The 2012 gonorrhea rate for Newton County was 130 per 100,000 compared with a statewide rate of 146 per 100,000.¹¹⁶ The gonorrhea rate for black residents (135 per 100,000) was seven times the rate for Whites (19 per 100,000) (Figure 40) and the rate for women (145 per 100,000) was higher than the rate for men (112 per 100,000) (Figure 41). Rates were highest among young adults age 20-29 years.

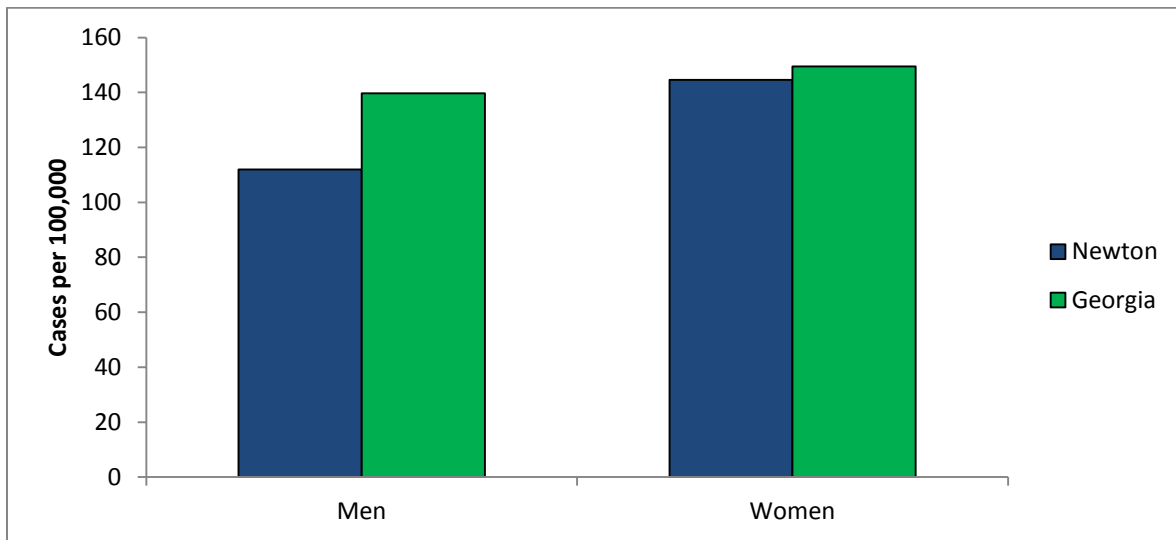
¹¹⁶ OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Figure 40. Gonorrhea Cases per 100,000 by Race/Ethnicity in Newton County and Georgia, 2000-2012



Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Figure 41. Gonorrhea Cases per 100,000 by Sex in Newton County and Georgia, 2000-2012



Source: OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Syphilis

The 2012 rate for syphilis, another STD, was 15 per 100,000 in Newton County compared with a statewide rate of 24 per 100,000.¹¹⁷ All 15 cases reported in 2012 were among African-Americans.

STD Summary

¹¹⁷ OASIS <http://oasis.state.ga.us/oasis/oasis/qryMorbMort.aspx>

Despite decreases in teen pregnancy, rates of STDs, particularly chlamydia, are rising in Newton County. Rates were highest among young people, suggesting that education interventions may be warranted.

Mental Health and Social Support

In 2005-2011, Newton County residents reported an estimated 2.7 days of poor mental health in the 30 days before interview compared with a Georgia average of 3.4 days.¹¹⁸ From 2005-2010, 20% of adults reported that they did not get the social and emotional support they needed, similar to the overall Georgia percentage of 21%. This indicator is important for overall health because research has shown that people with social and emotional support experience better health outcomes (including recovery from cardiac surgery, coping with cancer pain, and overall longevity) compared with people who lack such support.

Mental Health Care Providers

From 2011-2012, there was an estimated 1 mental health care provider per 33,357 residents in Newton County, suggesting that there was a severe shortage of mental health care providers in the county.¹¹⁹ By comparison, the Georgia ratio was 3,509:1.

Suicide

Suicide is a major, preventable public health problem, and was the tenth leading cause of death in the United States in 2010. In Newton County, it was the fifth leading cause of premature death in terms of years of potential life lost. The 2009-2011 age-adjusted death rate due to suicide in Newton was 13.2 per 100,000, which higher than the statewide rate of 11.4 per 100,000 and the Healthy People 2020 target of 10.2 per 100,000. The age-adjusted rate for males (22.1 per 100,000) was nearly four times the rate for women (6.3 per 100,000). Men age 65 years and older had the highest rate of suicide (47.6 per 100,000).

People 65+ Living Alone

People over age 65 years who live alone may be at risk for social isolation, limited access to support, and institutionalization. In Newton County, 21.4% of people over age 65 years live alone compared with the U.S. rate of 27.9%.¹²⁰

¹¹⁸ County Health Rankings

<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

¹¹⁹ County Health Rankings

<http://www.countyhealthrankings.org/app/georgia/2013/newton/county/outcomes/overall/snapshot/by-rank>

¹²⁰ U.S. Census Bureau <http://factfinder2.census.gov/>

Alzheimer's Disease

Alzheimer's disease is the fifth leading cause of death in the United States among adults 65 and older. In Newton County, the age-adjusted death rate due to Alzheimer's in 2009-2011 was 20.1 per 100,000, which was lower than the statewide rate of 27.6 per 100,000. No specific actions have been clearly shown to reduce the risk of Alzheimer's disease. However, diabetes, smoking, and depression have been associated with cognitive decline (or worsening mental function), and cognitive engagement and physical activity have been associated with a *lower* risk of cognitive decline. Since smoking cessation, physical activity, social and cognitive engagement, and prevention of diabetes have many other positive health benefits, promoting these activities is clearly worthwhile and might help prevent Alzheimer's Disease.

Mental Health Community Resources

The Newton County Mental Health Center (8201 Hazelbrand Road, Covington, GA 30014; 770-787-3977) provides mental health and substance abuse treatment to the adult population of Newton County. The clinic may also provide a list of meeting places for Alcoholics Anonymous and Narcotics Anonymous.

View Point Health, "a public agency created by state law to provide mental health, developmental disabilities, and addictive disease services," has several Newton County locations.¹²¹ The agency "provides a single point of entry for care where Master's level clinicians determine a person's immediate needs and offer support, evaluation and referral when appropriate."¹²²

The Georgia Department of Behavioral Health and Developmental Disabilities provides a free Crisis and Access Line (800-715-4225) and searchable database of resources for people with mental health problems, developmental disability, and addictive diseases.¹²³

Newton County has started a mental health court with the goal of identifying "people with mental health problems who are in jail or subject to being sentenced to jail and to supervise them and provide treatment so they can safely function in society."¹²⁴

¹²¹ View Point Health -- Newton County <https://www.myviewpointhealth.org/newton-county.da>

¹²² View Point Health – Access View Point Health Services <https://www.myviewpointhealth.org/access-vph-services.da>

¹²³ Georgia Department of Behavioral Health and Developmental Disabilities ResourceBase <https://bhlweb.com/tabform/Default.aspx>

¹²⁴ Newton Citizen. "Mental health court to start in July." April 1, 2013. <http://www.newtoncitizen.com/news/2013/apr/01/mental-health-court-to-start-in-july/>

Emergency Preparedness

Newton County has several agencies and organizations that plan for and respond to emergencies, which include natural disasters (e.g., floods), man-made accidents (e.g., a train wreck involving a chemical spill), disease epidemics or pandemics, and intentional acts of terrorism involving chemical, biological, or radiological devices. These groups include the Emergency Preparedness Department of the Health Department,¹²⁵ the Covington-Newton County Emergency Management Agency, the Newton County Sheriff's Office,¹²⁶ the Newton County Fire Service,¹²⁷ hospitals, emergency medical services (EMS), and volunteer groups, such as the Medical Reserve Corps.¹²⁸ Other partners include the Georgia Department of Public Health, the Georgia Emergency Management Agency, CDC, and the Federal Emergency Management Agency (FEMA).

The Strategic National Stockpile (SNS) is a national storehouse of medical supplies and pharmaceuticals maintained by CDC and local health departments, including the Newton County Health Department. It is deployed during an emergency situation in which a chemical or biological agent, such as anthrax or plague, is released into our community, which might happen by accident or as part of a terrorist attack.¹²⁹ For the past two years, the Health Department's Emergency Preparedness Department has received the top score (100%) from the CDC on a review of SNS emergency preparedness levels.

Information for Newton County residents on preparing themselves and their families for emergencies, including specific situations like floods, tornadoes, and hurricanes, as well as links to other organizations, is available through the Health Department¹³⁰ and other community sources.

¹²⁵ Newton County Health Department <http://www.gnrhealth.com/services/emergency-preparedness>

¹²⁶ Newton County Sheriff's Office <http://www.newtonsheriffga.org/index.html>

¹²⁷ Newton County Fire Service <http://www.newtoncountyfireservice.org/index.php>

¹²⁸ Medical Reserve Corps <https://www.medicalreservecorps.gov/MrcUnits/UnitDetails/71>

¹²⁹ Partners in Preparedness <http://www.gnrhealth.com/services/emergency-preparedness/pip-vol2-2#secret>

¹³⁰ Local Preparedness and Safety Information <http://www.gnrhealth.com/services/emergency-preparedness/local-preparedness-safety>